IOWA COURT RULES

FIFTH EDITION

April 2014 Supplement



Published under the authority of Iowa Code section 2B.5(2).

STEPHANIE A. HOFF ADMINISTRATIVE CODE EDITOR

PREFACE

The Fifth Edition of the Iowa Court Rules was published in July 2009 pursuant to Iowa Code section 2B.5(2). Subsequent updates to the Iowa Court Rules, as ordered by the Supreme Court, are published in electronic format only and include chapters that have been amended or adopted.

The Iowa Court Rules and related court documents are available on the Internet at https://www.legis.iowa.gov/IowaLaw/courtRulesListing.aspx.

To receive e-mail notification of the publication of a Supplement to the Iowa Court Rules, subscribe at https://www.legis.iowa.gov/Subscribe/subscriptions.aspx.

Inquiries: Inquiries regarding access to the Iowa Court Rules should be directed to the Legislative Services Agency's Computer Services Division Help Desk at (515)281-6506.

Citation: The rules shall be cited as follows:

Chapter 1 Iowa R. Civ. P.
Chapter 2 Iowa R. Crim. P.
Chapter 5 Iowa R. Evid.
Chapter 6 Iowa R. App. P.

Chapter 32 Iowa R. of Prof'l Conduct Chapter 51 Iowa Code of Judicial Conduct

All other rules shall be cited as "Iowa Ct. R."

Supplements: Supplements to the Fifth Edition of the Iowa Court Rules have been issued as follows:

| August 2009 | December 2010 | September 2013 |
|----------------|----------------|----------------|
| September 2009 | February 2011 | November 2013 |
| October 2009 | January 2012 | December 2013 |
| November 2009 | May 2012 | January 2014 |
| December 2009 | June 2012 | March 2014 |
| January 2010 | August 2012 | |
| February 2010 | September 2012 | |
| March 2010 | December 2012 | |
| May 2010 | March 2013 | |
| June 2010 | May 2013 | |
| August 2010 | June 2013 | |
| September 2010 | August 2013 | |

April 2014 Supplement

Changes in this supplement

| Rule 17.200 | Amended | Rules 39.5 and 39.6 | Amended |
|---------------------------------|----------|---------------------|---------|
| Rules 17.200, Forms 212 and 213 | Replaced | Rule 39.8 | Amended |
| Chapter 25 | Amended | Rules 41.3 and 41.4 | Amended |
| Rule 31.2 | Amended | Rules 42.1 to 42.4 | Amended |
| Pule 31 15 | Amended | | |

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| | | |

CHAPTER 17 FORMS FOR SELF-REPRESENTED LITIGANTS

Rule 17.1 Use of forms; mandatory for self-represented litigants. An individual who is not represented by an attorney in a legal proceeding covered under this chapter must use forms contained in this chapter. An attorney may use these forms but is not required to do so. [Court Order May 16, 2007; December 19, 2013]

Rules 17.2 to 17.99 Reserved.

Rule 17.100 Family law forms for dissolution of marriage without minor or dependent adult children. The following forms are for use in dissolution of marriage (divorce) actions without children under the age of 18 who are children of both spouses to the marriage, or children under the age of 18 who were adopted or born during the marriage, or children 18 years of age or older who are children of both spouses to the marriage and still need support. These forms cannot be used if a spouse of the marriage is pregnant.

| ise of the marriage is | pregnant. |
|------------------------|--|
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Adult Children

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[Court Order December 19, 2013]

Rule 17.100—Form 101: Petition for Dissolution of Marriage with no Minor or Dependent Adult Children

Read the Guide to Representing Yourself in an Iowa Divorce Case on the Iowa Judicial Branch website before using this form.

Do not use this form if any of the following are true:

- · You are not married.
- . Neither you nor your spouse has lived in Iowa for the last year before filing this Petition.
- · Petitioner or Respondent is pregnant.
- There are children 18 years of age or older (born or
- adopted) who still need support (for example, the child is in high school or college, or is disabled).
- There are children under the age of 18 who are children (born or adopted) of both spouses before or during the marriage, even if Petitioner or Respondent is not the natural parent.

If filing electronically, you must provide any protected information in full on form 111.

 \blacksquare If filing in paper, you may use form 111 to provide any protected information in full.

| | e lowa District Court for | County where you are | filing this Petition | County |
|---------|---|---|--|--------------------------|
| III Ke | the Marriage of: | | | |
| Your cu | ırrent legal name | Your spouse 's | current legal name | |
| Upon | the Petition of | | | |
| | | For clerk's use on | ly | |
| Petiti | Oner Your full name: first, middle, last | | r Dissolution of or Dependent A | |
| and co | oncerning | | | |
| Resp | ondent Your spouse's full name: first, mide | dle, last | | |
| | ersonal Information Fill in all in | | | |
| | d you fear for your safety, you may leave | your street address, phone | | |
| | | your street address, phone present residence: | | |
| | d you fear for your safety, you may leave | your street address, phone present residence: | number, and email l | |
| | d you fear for your safety, you may leave Petitioner's (your) birth year and | your street address, phone present residence: Biri | number, and email l th year | blank. ZIP code |
| A. | d you fear for your safety, you may leave Petitioner's (your) birth year and Petitioner's present street address | your street address, phone present residence: Birn City () Phone number | number, and email l th year State Email a | blank. ZIP code ddress |
| A. | d you fear for your safety, you may leave Petitioner's (your) birth year and Petitioner's present street address County | your street address, phone present residence: Birn City () Phone number | number, and email but th year State Email a | blank. ZIP code ddress |

Rule 17.100—Form 101: Petition for Dissolution of Marriage with no Minor or Dependent Adult Children, continued

2. General Information About the Marriage and the Parties

A. Date and location of the marriage Month City State B. Children Check all that are true (1) There are no children under the age of 18 who are children of both Petitioner and Respondent. (2) There are no children under the age of 18 who were adopted or born during this marriage. (3) There are no children 18 years of age or older who still need support. (4) Neither Petitioner nor Respondent is pregnant. C. Petitioner's residence You cannot get a divorce in Iowa if your spouse does not live in Iowa and you have lived in Iowa for less than one year, or if you came to live in Iowa just to get a divorce. If you have questions about this, talk to an attorney. (1) The only reason that Petitioner (you are Petitioner) is living in lowa is just to get a divorce.) True If you do not live in Iowa, or if you live in Iowa for reasons other than just to get a divorce, check "False." (2) Petitioner has lived in Iowa for the last _____ years and ____ months _ county. If you have always lived in Iowa, count the time since your birth. If you have been a resident of another state, count the time since you last moved to Iowa. D. Parties' residence Check each that is true (1) Petitioner has lived in Iowa for more than one year. (2) Respondent (your spouse) is a resident of Iowa. E. Condition of the marriage Check all that are true The marriage is broken and cannot be saved. (2) This is the only divorce case going on involving this marriage. If you did not check (2), explain in H. You should also talk to an attorney. (3) This Petition is being filed in good faith for the purpose of ending the marriage (4) Counseling will not save the marriage. If counseling may save the marriage, do not check (4).

3.

 $Rule\ 17.100 — Form\ 101:\ \textit{Petition for Dissolution of Marriage with no Minor or Dependent Adult Children}, continued$

| F. | | ndent's status | | |
|----|-------------|---|---|---|
| | Check e | ach that is true | | |
| | (1) | Respondent (your spouse) is in the mili | - | |
| | | If you check (1), note that there are special if your spouse is in the military. You should | | n going forward |
| | | | | |
| | (2) | Respondent is in prison or jail at | of facility | _ in <i>State</i> |
| G | Protoc | name o | of facility | State |
| G. | Check o | | | |
| | (1) | There is neither a "protective order" nor | r a "no contact order" between Peti | tioner (vou) and |
| | (1) | Respondent (your spouse). | | (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| | (2) 🔿 | There is a "protective order" or a "no co | | d Respondent. |
| | | If you check (2), fill in the following inform | | |
| | | a. County and state where the order came | e from: | State |
| | | b. Court case number: | · | siaie |
| | | b. Court case number. | | |
| Н. | Other i | information: | | |
| | | | | |
| | | | | |
| | | | | |
| р. | 4:4: | n'a Danisat | | |
| | | r's Request | | |
| Α. | | ner asks the court to: | | |
| | _ | ll that apply. The court will only consider ite | | |
| | (1) 📙 | End the marriage of Petitioner (you) an | d Respondent (your spouse). | |
| | (2) | Fairly divide the property and the debts | of the parties. | |
| | (3) | Order that Respondent pay the court fe | es. | |
| | (4) | Order that Respondent pay for Petitioner <i>If you check</i> (4), <i>you must file form 122</i> . | 's attorney's fees before the divorce | is final. |
| | (5) | Order that Respondent pay spousal sup If you check (5), you must file form 122. | | |
| | (6) | Change Petitioner's last name to: | Name can only be changed to name certificate or name used immediately | |
| | | Print your former or birth name | to the marriage. | |
| | (7) | Other request: | | |
| | (/) 📙 | Other request. | | |
| | | | | |

4. Attorney Help

 $Rule\ 17.100 - Form\ 101:\ Petition\ for\ Dissolution\ of\ Marriage\ with\ no\ Minor\ or\ Dependent\ Adult\ Children,\ continued\ Marriage\ with\ no\ Minor\ or\ Dependent\ Adult\ Children,\ continued\ Marriage\ with\ no\ Minor\ or\ Dependent\ Adult\ Children,\ continued\ Marriage\ with\ no\ Minor\ or\ Dependent\ Adult\ Children,\ continued\ Marriage\ with\ no\ Minor\ or\ Dependent\ Adult\ Children,\ continued\ Marriage\ with\ no\ Minor\ or\ Dependent\ Adult\ Children,\ continued\ Marriage\ with\ no\ Minor\ or\ Dependent\ Adult\ Children,\ continued\ Marriage\ with\ no\ Minor\ or\ Dependent\ Adult\ Children,\ continued\ Marriage\ Marriage\ with\ no\ Minor\ or\ Dependent\ Marriage\ Marriage\ with\ no\ Minor\ or\ Dependent\ Marriage\ Mar$

| Check one | | | | |
|---|------------------------|----------------------------|-------------------------|----------------------|
| A. An attorney did not | help me prepare o | or fill in this paper | | |
| B. An attorney helped | | | | |
| Name of attorney or or | ganization, if any | Attorney's P.I.N. | # – Ask the attorne | y |
| Business address of att | orney or organization | City | State | ZIP code |
| ()_ Attorney's phone numb | per () Attorney's f |) fax number – optional | Attorney's email | address – optional |
| Service Instructions If Petitioner is filing in paper Check one A. Petitioner will accept B. Petitioner will accept Oath and Signature | pt service of docur | | | |
| 1. | . hav | ve read this Petiti | on. and I certify ι | under penalty |
| Print your name | | | ,, - | , |
| of perjury and pursuant to in this Petition is true and | correct. | | ∍ information I ha | ave provided |
| Signed on: Month Do | , 20 <u>Year</u> | Your signature* | | |
| Mailing address | | City | State | ZIP code |
| () Phone number | Email address | Add | ditional email addre. | ss, if applicable |
| * Whether filing electronically or i scan the form after signing it and | | rite your signature on t | his form. If you are fu | ling electronically, |

Important Notice to Petitioner See next page for instructions for filing a Petition.

Instructions for Rule 17.100—Form 101: Petition for Dissolution of Marriage with no Minor or Dependent Adult Children, continued

Do not file these instructions

Instructions for Filing a Petition for Dissolution of Marriage

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

☐ Filing your Petition electronically

- If you are filing your divorce case in a county that uses electronic filing, you must register to
 electronically file. For help with registration, see the eFiler's User Guide <u>How to Register Pro Se (Self Represented) for eFiling.</u>
- After you have registered, <u>log in to the electronic filing system</u> to electronically file your dissolution case.
- For help electronically filing your divorce, see <u>How to eFile a New Case</u>.
- With your Petition, you must also file an Original Notice (104) and a Protected Information Disclosure Form (111).
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling
 of your Petition and other documents.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My
 Filings, correct the error, and resubmit your filing. For help, see <u>How to Resubmit a Returned Filing</u>.
- Log in to your eFile account and download and print your Petition and Original Notice so that you can serve it on (deliver it to) your spouse.
- For help finding and downloading your Petition and Original Notice, please see <u>My Filings Reference</u> Guide.

Filing your Petition in paper

- If the county where you will be filing your Petition does not yet accept electronic filing, you may
 proceed in paper. If the county does accept electronic filing, you must proceed electronically, unless
 you have received permission from the court to file in paper.
- With your Petition (101), you must also file a Petition Cover Sheet (102), an Original Notice (104a), and a Confidential Information Form (103).
- Forms 101 and 104a: Make two photocopies if you can deliver copies of these forms to your spouse
 in-person or by mail. Make three photocopies if you are going to ask the county sheriff or a civil
 process server to deliver these forms to your spouse.

Note about making photocopies: You should make your photocopies before you go to the courthouse to file your papers. It is expensive to make photocopies at the clerk of court office. It is cheaper to make the copies at a business that makes photocopies or at a public library.

- Forms 102 and 103: You do not have to make photocopies of these forms.
- Take the original forms you filled in and the photocopies to the clerk of court office in your county.
 Tell the clerk at the counter you are filing a Petition for a divorce.
- Give the clerk at the counter these forms:

Instructions for Rule 17.100—Form 101: Petition for Dissolution of Marriage with no Minor or Dependent Adult Children, continued

- 101 Petition for Dissolution of Marriage (Divorce) with no Minor Children
- 102 Coversheet for a Petition for Dissolution of Marriage with no Minor Children
- 103 Confidential Information Form (Do not make copies of this form.)
- 104a Original Notice
- Pay the filing fee. If you cannot afford to pay the filing fee, prepare and file form 109.
- The clerk at the counter can tell you the amount of the filing fee. The Iowa legislature sets these fees and periodically raises them, so check with the clerk's office to confirm the current filing fee.
- The clerk of court will sign the Original Notice (104a). You will have to serve this form on (deliver it to) your spouse.
- The clerk at the counter will time-stamp each of the copies (original and photocopies).

Do not file these instructions

Rule 17.100—Form 102: Petition Cover Sheet for a Dissolution of Marriage with no Minor or Dependent Adult Children

| For court use only Case nun | iber | County where case is fil | ed | _ |
|--------------------------------|-------------|--------------------------|-------|----------|
| Petitioner | | · | | |
| Petitioner's first name | Middle name | Last name | | _ |
| Street address | | City | State | ZIP code |
| () Phone number Case name | Email addr | ess | | |
| Petitioner's first name | Middle name | Last name | | _ |
| VS. | | | | |
| Respondent's first name | Middle name | Last name | | _ |

Note to Petitioner

- Petitioner must complete this cover sheet if filing in paper and give it to the district court clerk when filing a
 Petition for Dissolution of Marriage with no Minor or Dependent Adult Children.
- . Do not serve this cover sheet on Respondent.
- This cover sheet is for statistical purposes only. It has no legal effect in the case.
- For electronic filers: You do not have to file this form. This information is automatically generated when you submit your documents electronically.

Rule 17.100—Form 103: Confidential Information Form

This form is to be used by paper filers only.

Each party must complete one of these forms if filing in paper.

lowa Code section 602.6111 requires the parties to a case to provide the clerk of court with certain personal identification information. Each party's completed form will be kept confidential by the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| n u | ne Iowa District Court for | County where you | ur case is filed |
|-------|--|-------------------------------|---------------------------|
| Jpc | on the Petition of | Equity case | e no |
| he sp | itioner Full name: first, middle, last souse who files the Petition for Dissolution of Marria, | | idential Information Form |
| | spondent Full name: first, middle, last her spouse | | |
| 1. 1 | Petitioner's information | , | |
| 1 | Full name: First, Middle, Last | Birth date | Social Security number |
| 2. I | Respondent's Information | | |
| 1 | Full name: First, Middle, Last | Birth date | Social Security number |
| | Signature of Provider of Inform | | |
| | Print your j | full name: first, middle, las | st |
| | | Month | |

Important Notice:

Do not give copies of this form to anyone except the clerk of court.

Rule 17.100—Form 104: Original Notice for Personal Service

| Petitioner must serve the Petition on Respo Failure to meet this deadline may result in the | | | Petition. | |
|--|----------------------|-------------------------------------|-----------------------|--|
| Read the <i>Guide to Representing Yourse</i> | | (A) | wa Judicial | Branch website |
| for additional important instructions. | ij iii dir lond l | on ale is | on a sacroiar. | Didneil Weesite |
| If filing electronically, Petition | 1er must comp | lete this form. | | |
| If filing in paper, Petitioner m | ust use form 1 | 04a. | | |
| If you do not understand how to use this fo | orm, or if you | should use this form, | talk to an at | torney. |
| In the Iowa District Court for | | | | County |
| _ | | County where Petitic | on is filed | |
| Upon the Petition of | | Original Not | ice for Pe | rsonal Service |
| Petitioner Full name: first, middle, last | | | | |
| and concerning | | | | |
| Respondent Full name: first, middle, last | | | | |
| Petitioner (your spouse) has file A copy of the Petition for Dissol Petitioner asks for a divorce. Petitioner's contact information of | ution of Marr | iage is attached to the vorce case: | | ent. |
| | | | | |
| Mailing address | City | | State | ZIP code |
| Phone number | Email addres | SS | === | |
| Important inst | tructions for | r Respondent on n | ext page | |
| | | | | |
| If you need assistance to participate in court due to a dishearing or speech impaired may call Relay lowa TTY (1-contact information available at: http://www.iowacourts.gc | 800-735-2942). Di | sability coordinators cann |) ot provide legal | Persons who are advice. Disability coordinator |

November 2013 Rule 17.100—Form 104 Page 1 of 3

Upon electronic filing, a clerk's signature page will be attached to this document as page 3.

Rule 17.100-Form 104: Original Notice for Personal Service, continued

Instructions to Respondent

- A. You must file an Answer or a Motion with the clerk of court in the above county within 20 days after you receive this Original Notice. If you do not file an Answer or Motion within 20 days after receiving this Original Notice, the court may enter a judgment against you giving Petitioner what he or she asked for in the Petition.
- B. For help in your divorce case, and for forms that you must use if you choose to represent yourself without an attorney, visit the Iowa Judicial Branch website at http://www.iowacourts.gov/ and click on "Court Rules & Forms" or on "For the Public."
- C. If you received Petition form 101, you may use Answer form 115.
- D. This case has been filed in a county that uses electronic filing. You must register to eFile through the Iowa Judicial Branch website at https://www.iowacourts.state.ia.us/Efile and obtain a log in and password for filing and viewing documents in your case and for receiving service and notices from the court.
 - For general rules and information on electronic filing, refer to the Iowa Court Rules Chapter 16
 Pertaining to the Use of the Electronic Document Management System, available on the Iowa Judicial
 Branch website.
 - For court rules on the Protection of Personal Privacy in court filings, refer to Division VI of the Iowa Court Rules Chapter 16.
 - If you are unable to proceed electronically, you must receive permission from the court to file in paper.
 Contact the clerk of court in the county where the petition was filed for more information on being excused from electronic filing.
- E. If you electronically file your Answer or Motion, it will be served automatically on Petitioner or on Petitioner's attorney(s). A Notice of Electronic Filing (NEF) will tell you if the court has excused Petitioner from electronic filing. If the court has excused Petitioner from electronic filing, you must mail a copy of your Answer or Motion to Petitioner.

Important Notice to Respondent
You should talk to an attorney at once to protect your interests.

Page 1 of 1

Rule 17.100—Form 104a: Original Notice for Personal Service

| | d the <u>Guide to Representing Yourself in an Iowa Divor</u> ortant instructions. | rce Case on the Io | wa Judicial Branch websit | e for additional |
|------|--|--|---|---|
| p | If filing electronically, Petitioner must use form | 104. | | |
| | If filing in paper, Petitioner must use this form. | | | |
| If y | ou do not understand how to use this form, or if ye | ou should use thi | s form, talk to an attorn | ży. ————— |
| ln | the lowa District Court for | | | County |
| | | County whe | re Petition is filed | |
| Up | oon the Petition of | Equity | 0000 00 | |
| • | | Equity | case no | |
| _ | A:4: | Origir | nal Notice for Per | sonal Service |
| Pe | titioner Full name: first, middle, last | | | |
| an | d concerning | | | |
| | 3 | | | |
| Re | spondent Full name: first, middle, last | | | |
| _ | | | | |
| | A copy of the Petition for Dissolution of Petitioner asks for a divorce. Petitioner's contact information during the displacement. | livorce case: _ | etitioner's name | |
| | | • | cuttoner s name | |
| | Mailing address City | | State | ZIP code |
| | | | | |
| | Phone number Email addre | ess | | |
| 2. | Instructions to Respondent Name | d Above | | |
| | You must file an Answer or a Motion with the this Original Notice. If you do not file an Answ court may enter a judgment against you given If you received Petition form 101, you may be After you file your Answer or Motion, you may be a support of the provided Head of t | ver or Motion withi ving Petitioner wh use Answer form | n 20 days after receiving at he or she asked for in 115. | this Original Notice, the |
| (SE | (AL) | 2 <u></u> | | |
| | | Clerk of Court | | |
| lm | portant Notice to Respondent | r) | | County Courthouse |
| | u should talk to an attorney at once to | | | , Iowa |
| pic | tect your interests. | City | | ZIP code |
| | u need assistance to participate in court due to a disability, cont ing or speech impaired may call Relay lowa TTY (1-800-735-25 | | | Persons who are ladvice. Disability coordinator |

Rule 17.100-Form 104a

[Court Order November 6, 2013]

November 2013

Rule 17.100—Form 105: Acceptance of Service

Petitioner must complete this section:

| In the Iowa District Court for | County where Petition is filed | ! | County |
|--|---|--------------|--------------|
| Upon the Petition of | Equity case no | | |
| Petitioner Full name: first, middle, last | Acceptance | of Servi | ce |
| and concerning | | | |
| Respondent Full name: first, middle, last | | | |
| Petitioner must file this form with the clerk of cour | rt soon after Respondent signs it. | | |
| Respondent must complete this section: | o Ooth and Signature | | |
| Respondent's Acceptance of Service If Respondent completes this Acceptance of Service signing it. Petitioner will file it with the clerk of complete it. | e, Respondent must return this form to | Petitioner : | soon after |
| I, | , am Respondent in this c | ase. I rec | eived a copy |
| of the Original Notice and the Petition for the Cortify under penalty of perjury and pursuinformation I have provided in this Acceptation, 20, 20 | uant to the laws of the State of ance of Service is true and cor | lowa that t | |
| Signed: Month Day Year | Respondent's signature | | |
| Respondent's mailing address | City | State | ZIP code |
| Phone number Email address | <u> </u> | | |

Important Notice to Respondent

By signing this form, you are not agreeing to what Petitioner wants. You are only agreeing that you received a copy of the Original Notice and Petition.

Rule 17.100—Form 106: Directions for Service of Original Notice

Petitioner must complete this form if the sheriff or a process server will deliver the Petition and Original Notice to Respondent.

 $Do \ not \ use \ this form \ if \ Respondent \ has \ already \ received \ the \ Petition \ and \ Original \ Notice.$

Do not file this form with the clerk of court in paper or electronically.

Give this form to the sheriff or other process server with your Petition (101) and Original Notice (104 if electronically filing or 104a if filing in paper).

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| ouni | y where Petition is filed | Equity case number | | |
|----------------|--|------------------------------------|-------|----------|
| | lame and Location of Sho theck one and fill in the blanks | eriff or Other Process Serve | er | |
| Д | . Sheriff In county where R | espondent will be served County | | |
| | Street address | City | State | ZIP code |
| В | Other process server | | | |
| | Name of other person servin | g the Notice | | |
| | Street address | City | State | ZIP code |
| P | erson to be Served | (| | |
| Y | our spouse 's name | Phone number | | |
| \overline{A} | ddress where your spouse can be s | erved City | State | ZIP code |
| P | erson Requesting Servic | ce () | | |
| Y | our name | Phone number | | |
| \overline{Y} | our present mailing address | City | State | ZIP code |

Continued on next page

5. Costs of Service

Rule 17.100—Form 106: Directions for Service of Original Notice, continued

| | Check one | |
|----|--|---|
| | A. O Petitioner will pay the costs of the Sheriff If you cannot afford the costs, file form 109. | or other process server. |
| | B. Costs for Sheriff deferred by court order: | |
| | , | Clerk of court: Sign only if costs deferred |
| | | by court order |
| 6. | Notification | |
| | After completion of service, the sheriff or other pro- requesting service. | cess server will notify the person |
| | , 20 | |
| | Date signed: Month Day Year | Your signature |

Rule 17.100—Form 107: Motion and Affidavit to Serve by Publication

Petitioner: Use this form only if you do not know where your spouse lives or works.

- You must contact a newspaper that is generally distributed or circulated throughout the county where you filed the Petition.
- Ask if the newspaper will publish your Original Notice by Publication (108) in your divorce case.
- Tell the newspaper you need to publish the Notice once each week for three weeks in a row.
- If the newspaper can publish your Notice three weeks in a row, ask how much it will cost.
- Tell the newspaper you will call back to arrange for publishing your Notice after a judge gives you permission to publish your Notice in the newspaper.
- The fees for publication are set by statute in Iowa Code section 618.11.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| n the | e Iowa District Court for | | 01 14 D | County |
|--------|--|--|-------------------------------------|----------|
| | | County where you | i filed the Petition | |
| Upon | the Petition of | | se no. | |
| Petiti | oner Full name: first, middle, last | | lotion and Affid erve by Publica | |
| and c | oncerning | | | |
| Resp | ondent Full name: first, middle, la | LST | | |
| | formation and Requests Respondent's residence | | | |
| | Check each that applies (1) Respondent lives out: (2) Respondent's resider | side of lowa. nce and place of employment a | aro unknown | |
| В. | | | are urkilown. | |
| | Street address | City | State | ZIP code |
| | County | Phone number | Email a | ddress |
| C. | Most recent date Responde | ent is known to have been a _, $20 {Year}$ | at the address abo | ove: |

Rule 17.100—Form 107: Motion and Affidavit to Serve by Publication, continued

| D. Petitioner has taken these steps to find R | despondent: |
|---|--|
| | |
| | |
| | |
| E. Petitioner will publish notice in this newsp | |
| | Name of newspaper |
| F. Petitioner asks the court to allow Petition Respondent cannot be personally served | er to serve Respondent by publication because l. |
| | |

Continued on next page

Rule 17.100-Form 107: Motion and Affidavit to Serve by Publication, continued

| 2. | Attorney Help Check one | | | |
|----|---|----------------------|-------------------------|------------------|
| | A. An attorney did not help me prepare o | r fill in this paper | | |
| | B. An attorney helped me prepare or fill in If you check B, you must fill in the following in | n this paper. | | |
| | Name of attorney or organization, if any | Attorney's P.I.N. | # – Ask the attorney | |
| | Business address of attorney or organization | City | State | ZIP code |
| 3. | Attorney's phone number Attorney's fa | x number – optional | Attorney's email ac | idress – optiona |
| | I,, hav | e read this Motio | n and Affidavit, an | d I certify |
| | under penalty of perjury and pursuant to the la have provided in this Motion and Affidavit is tr | | of lowa that the inf | ormation I |
| | Signed on: Month Day Year | Your signature* | | |
| | Mailing address | lity | State | ZIP code |
| | () Phone number | Ada | litional email address, | if applicable |

^{*} Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.

Rule 17.100—Form 108: Original Notice by Publication

Petitioner should complete this form only if a judge has signed an order giving permission to publish this Notice in a newspaper.

After you take this Notice to the newspaper, promptly mail a copy of this Notice and the Petition to Respondent's last known mailing address.

Note to Petitioner: Fill in third date of publication in section 2 below.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

Newspaper: Publish only the information below this line.

| n the Iowa District Court for | County where Peti | tion is filed |
|---|---|--|
| Upon the Petition of | | no. |
| Petitioner Full name: first, middle, last and concerning | Origina | l Notice by Publication |
| Respondent Full name: first, middle, last | | |
| Petitioner (your spouse) has filed a divo Petitioner's contact information during the spouse in the spous | orce lawsuit naming you as Res he divorce case: | spondent. |
| Petitioner's first name Middl | le name Last n | ame |
| Petitioner's present street address | City | State ZIP code |
| County | () Phone number | Email address |
| 2. Respondent's deadline for filing a You must file an Answer or a Motion wit | th the clerk of court in the al | bove county within 20 days afte |
| Month Day Year | | |
| 3. Instructions to Respondent Name You must file an Answer or a Motion with the provided above. If you do not respond, the she asked for in the Petition. | ne clerk of court in the above c court may enter a judgment ag | ainst you giving Petitioner what he |
| You should talk to an attorney at once to protect If you choose not to have an attorney represent self-represented litigant information and family litigant. | t you in this matter, go to the lowa | |
| f you need assistance to participate in court due to a disability, learing or speech impaired may call Relay lowa TTY (1-800-7; contact information available at: http://www.iowacourts.gov/Adr | 35-2942). Disability coordinators can |) Persons who are nnot provide legal advice. Disability coording |

Rule 17.100-Form 108: Original Notice by Publication, continued

Newspaper: only publish the instructions below if your county uses electronic filing. To determine if your county uses electronic filing, check the map available on the Iowa Judicial Branch website under "eFiling," or call the clerk of court office in your county.

- You must register to eFile through the Iowa Judicial Branch website at
 https://www.iowacourts.state.ia.us/Efile/ and obtain a log in and password to file and view documents in your case and to receive service and notices from the court.
- For general rules and information on electronic filing, refer to the Iowa Court Rules Chapter 16
 Pertaining to the Use of the Electronic Document Management System, available on the Iowa Judicial
 Branch website.
- For court rules on the Protection of Personal Privacy in court filings, refer to Division VI of the Iowa Court Rules, Chapter 16.

Rule 17.100—Form 109: Application and Affidavit to Defer Payment of Costs

Petitioner uses this form only if Petitioner cannot afford to pay the fees to file and serve the Petition.

- Use this form if it would cause you to suffer a hardship if you had to pay the filing fee and cost of serving papers.
- You may need to provide proof of your income and assets and your expenses.
- Costs and fees paid to someone other than the court or sheriff cannot be waived. For example, you may have to pay to publish a legal notice in the newspaper or to hire an expert to testify.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In | the | lowa District Court for | unty where your case is filed |
|----------------|-------|---|---|
| U _I | oon | the Petition of | Equity case no |
| Pe | etiti | Oner Full name: first, middle, last | Application and Affidavit to Defer Payment of Costs |
| an | d co | oncerning | |
| Re | esp | ondent Full name: first, middle, last | |
| 1. | Re | equest | |
| | A. | I am Petitioner. | |
| | B. | For my Application and Affidavit, I state the Check all that apply | nat: |
| | | (1) \[\sum \] I am unable to pay the filing fee or set | rvice costs or other court costs. |
| | | (2) ask the court for permission to proce | eed without prepayment of costs and fees. |
| | | (3) am filing this Application and Affidav | it in good faith. |
| | | (4) 🗌 I believe I am entitled to what I am as | king for in this case. |
| | C. | Household | |
| | | There are $\underline{\hspace{1cm}}_{Number}$ people living in my house | ehold. |
| | D. | My household income is \$ | per month. |
| | | Put the total amount of all income and benefits beg | fore deductions for all members of your household. |
| | E. | My income comes from: | |
| | | List the sources of your income. Examples: salary, | wages, or benefits such as unemployment, Title 19, FIP. |

Rule 17.100—Form 109: Application and Affidavit to Defer Payment of Costs, continued

| F. | My household has th | e following monthly expenses: |
|----|----------------------|---------------------------------|
| | (1) Rent or mortgage | \$ |
| | (2) Utilities | \$ |
| | (3) Phone | \$ |
| | (4) Food | \$ |
| | (5) Transportation | \$ |
| G. | I have \$ | in cash, checking, and savings. |

Continued on next page

 $Rule~17.100 \\ -Form~109: \textit{Application and Affidavit to Defer Payment of Costs,} \ continued$

| A. O Ar | n attorney | did not hel | lp me prep | are or fill in this | paper. | | |
|---|--|--|---|--|--------------------------|--|-----------------------------------|
| | | | | or fill in this pape wing information: | er. | | |
| Na | ame of attorn | ney or organi | ization, if an | y Attorney | 's P.I.N. # - | - Ask the attorn | ney |
| \overline{Bu} | ısiness addre | ess of attorne | ry or organiz | cation City | | State State | ZIP code |
| (| torney's pho | ne number | (|) ney's fax number – . | optional . | Attorney's ema | iil address – op |
| Section 3 to This docum I, Print you | be complete ent, if filed o | ed onl y if fili electronicall | ing in paper ly, will auton | or Delivery or if the other part natically be served _, certify that on the Affidavit to the | on registere | ed parties. Day | , 20 <u> </u> |
| Name of pe | rson to whon | n I delivered | l or mailed it | - | | | |
| | | | | | | | |
| - | attorney's mo | | 22. | - City | | State | ZIP code |
| Oath and I, Print you penalty of | d Signatu r name perjury an | ure | , have | read this Applica s of the State of s true and correc | lowa that t. | ∖ffidavit, and | I certify und |
| Oath and I, Print you penalty of | d Signatu er name perjury an n this Appli | ure | , have | read this Applicas | lowa that t. | Affidavit, and | I certify und |
| Oath and I, Print you penalty of provided i | d Signatur name perjury an n this Appli | ure d pursuant | , have to the law. I Affidavit is | read this Applica s of the State of s true and correc | lowa that t. | Affidavit, and | I certify und |
| Oath and I, Print you penalty of provided i | d Signatur name perjury an n this Appli Month | d pursuant ication and | , have to the law. I Affidavit is | read this Applicant softhe State of the State of true and correct and view of the Your signature. | lowa that t. | Affidavit, and the informati | I certify unde |
| Oath and I, Print you penalty of provided i Signed on: Mailing add Phone num * Whether for | d Signatur name perjury an n this Appli Month dress ber | d pursuant ication and Day | , have to the laws Affidavit is , 20 Year | read this Applicates of the State of true and correct and correct and correct areas and correct and correct areas are also as a second and a second areas are also as a second areas areas are also as a second areas are also as a second areas | lowa that t. * Addition | Affidavit, and the information of the information o | I certify und on I have ZIP code |

Rule 17.100—Form 110: Affidavit of Service of Original Notice and Petition for Dissolution of Marriage

This form is used only if someone other than Petitioner (you), a sheriff, or a process server delivered a copy of the Petition and Original Notice to Respondent (your spouse).

- The person, other than Petitioner, who gave the Petition and Original Notice to Respondent, fills in this form.
- Petitioner, or the person who gave the Petition and Original Notice to Respondent, must file this form with the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| 11 (| he Iowa District Court | ior | County where Per | tition is filed | County |
|---|--|-----------------------|------------------------------|--|---------------------|
| Jp | on the Petition of | | Equity cas | se no | |
| Pet | itioner Full name: first, middle, lo | ast | | avit of Service of lotice and Petitio | |
| nd | concerning | | Di | issolution of Mar | riage |
| Res | spondent Full name: first, mia | dle, last | _ | | |
| _ | Affidavit | | | | |
| | I, , delivered a copy of the Original Notice and | | | | |
| | I,, delivered a copy of the Original Notice and Name of person - Cannot be Petitioner, sheriff, or process server | | | | |
| | Petition for Dissolution of Marriage for this case to: Check one | | | | |
| | | | | | a.m. |
| | Name of Respondent | on | | , 20 at _ | O p.m. |
| | | | | ry Year Ti | me |
| | by handing Respondent co | pies of the atta | ached papers. | | |
| | Oath and Signature | | | | |
| | To be completed by the person v | ho gave the Petit | tion and Original No | tice to Respondent. | |
| I,, have read this Affidavit of Service | | | ce and I certify | | |
| | Print your name | | | , | oo, ana . oo, |
| | under penalty of perjury and pursuant to the laws of the State of Iowa that the information I | | | | |
| | nave provided in this Affidavit of Service is true and correct. | | | | |
| | | 20 | | | |
| | Signed on: Month Day | , 20 Year | Your signature* | | |
| | Mailing address | | City | State | ZIP code |
| | () | | | | |
| | Phone number | Email address | | Additional email add | ress – if available |
| | * If you are filing electronically, sc | | | | - |
| | sy you are junig even orneany, se | an nee joins ageer se | gioreg is used siterifite to | con omeany. | |
| ~/6 | mber 2013 | Pule | 17.100—Form 110 | | Page 1 of 1 |

[Court Order November 6, 2013]

Rule 17.100—Form 111: Protected Information Disclosure

It is the responsibility of counsel, if any, and the parties to ensure that protected information is omitted or redacted from documents or exhibits filed with the court. The clerk of court will not review filings to determine whether the required omissions or redactions have been made. For electronic filers, see division VI of Chapter 16 of the Iowa Court Rules. For paper filers, see Iowa Rule of Civil Procedure 1.422

Use this form to identify the full version of any protected information redacted in other documents you have filed.

■ If filing electronically:

- Petitioner must complete this form (111) and file it with the Petition (101) and Original Notice (104).
- Respondent must complete this form if adding or correcting protected information.
- Paper filers also may use form 111 to assist in complying with Iowa Rule of Civil Procedure 1.422.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the Iowa District Court for | County where the case is filed | | |
|---|----------------------------------|--|--|
| Con | | | |
| Upon the Petition of | Equity case no | | |
| Petitioner Full name: first, middle, last | Protected Information Disclosure | | |
| and concerning | | | |
| Respondent Full name: first, middle, last | | | |

For electronic filers:

When protected information, as defined in lowa Court Rule 16.602, is required by law to be included or is material to the case and must be included in non-confidential documents, a party shall include the protected information on this form.

For an explanation of a filer's responsibility and the procedures to use for protecting personal information, refer to Iowa Court Rules: Chapter 16, Rules Pertaining to the Use of the Electronic Document Management System, Division VI, Protection of Personal Privacy. Rule 16.602 provides the list of protected information. Rule 16.604 provides a list of information that may be redacted.

1. Petitioner The spouse who filed for divorce.

A. Name

Provide the complete version of protected information and the redacted version included in documents you file.

| First | Middle I | Last |
|--|---|---|
| Protected Information Type | Complete Information (See Rules 16.602 and 16.604) | Redacted Information (See Rule 16.605) |
| (1) Social security number | XXX-XX-XXXX | Last four digits only |
| (2) Financial account numbers | Full account number | Partial account number only |
| (3) Date of birth | / / mm/dd/yyyy | Year only |
| (4) Individual taxpayer identification numbers | XXX-XX-XXXX | Last four digits only |

Rule 17.100-Form 111: Protected Information Disclosure, continued

| (5) Personal identification numbers | Full number | Partial only |
|--------------------------------------|------------------|---------------------|
| (6) Other unique identifying numbers | Full number | Partial only |
| (7) | | |
| Additional protected information | Full information | Partial information |
| (8) | | |
| Additional protected information | Full information | Partial information |
| (9) | | |
| Additional protected information | Full information | Partial information |
| (10) | | |
| Additional protected information | Full information | Partial information |

2. Respondent *The spouse who did not file for divorce.*

Provide the complete version of protected information and the redacted version included in documents you file.

| A. Name | | |
|--|--|--|
| First | Middle | Last |
| Protected Information Type | Complete Information (See Rules 16.602 and 16.604 | Redacted Information (See Rule 16.605) |
| (1) Social security number | XXX-XX-XXXX | Last four digits only |
| (2) Financial account numbers | Full account number | Partial account number only |
| (3) Date of birth | / / mm/dd/yyyy | Year only |
| (4) Individual taxpayer identification numbers | XXX-XX-XXXX | Last four digits only |
| (5) Personal identification numbers | Full number | Partial only |
| (6) Other unique identifying numbers | Full number | Partial only |
| (7) Additional protected information | Full information | Partial information |
| (8) Additional protected information | Full information | Partial information |
| (9) Additional protected information | Full information | Partial information |
| (10) Additional protected information | Full information | Partial information |

Check this box if you are attaching a separate sheet listing additional information for Respondent.

Rule 17.100—Form 111: Protected Information Disclosure, continued

3. Information provided by:

| Handwritten signature of party completing this form | S Electronic signature of party completing this form |
|---|--|
| or attorney if filing in paper | or attorney if filing electronically |

| Law firm, if applicable | | | |
|-------------------------|----------|---------------------------|----------|
| Mailing address | City | State | ZIP code |
| () Phone number | - | | |
| Email address | Addition | nal email address, if app | plicable |

Month Day

Date information provided

Rule 17.100—Form 115: Answer to Petition for Dissolution of Marriage with no Minor or Dependent Adult Children

Respondent must file an Answer within 20 days after receiving the Petition and Original Notice, or the court may enter a judgment against Respondent giving Petitioner what he or she asked for in the Petition.

Use this Answer form 115 if you received Petition form 101, otherwise use form 116.

Read the Guide to Representing Yourself in an Iowa Divorce Case on the Iowa Judicial Branch website before using this form.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (111).

| the lowa District Court for | where your spouse filed the Petition |
|---|--|
| Upon the Petition of | Equity case no |
| Petitioner Your spouse's full name: first, middle, last | Answer to Petition for Dissolution of Marriage with no Minor or Dependent Adult Children |
| nd concerning Respondent Your full name: first, middle, last | |
| A. Petitioner's information Check one If paragraph 1A of the Petition (form 101) is not | t correct, check (2) and fill in the blanks. |
| (1) Petitioner's (your spouse's) birth year (2) Petitioner's birth year and present res The correct information is: Birth year | and present residence are correct in the Petition. |
| (2) Petitioner's birth year and present res | and present residence are correct in the Petition. |
| (2) Petitioner's birth year and present res The correct information is: Birth year Present street address | and present residence are correct in the Petition. |

| Rule | 17.1 | 00—Form | 115: Answer to Petition for Disse | olution of Ma | rriage with no M | inor or Dependent A | Adult Children, o | continued |
|------|------|-------------------------------|---|---|--|---|-------------------------------|-----------|
| | | | Present street address | | City | | State | ZIP code |
| | | | County | (| hone number | | Email a | ddress |
| 2. | Ge | eneral | Information About | the Mai | rriage and | the Parties | S | |
| | A. | Date a | and location of the marr | iage form 101) is f the marri | s not correct, iage are corr | check (2) and file | <i>ll in the blani</i> on. | tcs. |
| | | | Month | Day | ·, Year | City | | State |
| | B. | If you a (1) □ (2) □ (3) □ | all that are true do not check one or more o There are no children ur There are no children u There are no children 1 | nder the ag nder the a 8 years of | ge of 18 who ge of 18 who age or older | are children of were adopted who still need s | or born durir | |
| | _ | . , | Neither Petitioner nor R | esponaen | ı is pregnanı | | | |
| | U. | | ner's residence e only reason that Petiti True Talse If you do not live divorce, check "I | in Iowa, o | , , | - | , , | |
| | | (2) If y | ou disagree with paragrap | oh 2C(2) oj | f the Petition | (form 101), fill i | n the blanks. | |
| | | Pe | titioner has lived in Iowa | for the la | st y | ears and | month | S |
| | | In . | | col | unty. | | | |

 $Rule\ 17.100 - Form\ 115: Answer\ to\ Petition\ for\ Dissolution\ of\ Marriage\ with\ no\ Minor\ or\ Dependent\ Adult\ Children,\ continued$

| D. | Parties' residence |
|----|--|
| | Check each that is true |
| | (1) Respondent (you are Respondent) is a resident of lowa. |
| | (2) Petitioner (your spouse) has lived in lowa for more than one year. If you did not check (1) or (2), you should talk to an attorney. |
| _ | |
| E. | Condition of the marriage Check all that are true |
| | (1) The marriage is broken and cannot be saved. |
| | (2) This is the only divorce case going on in involving this marriage. |
| | If you did not check (2), explain in 2I. You should also talk to an attorney. |
| | (3) Petitioner did not file the Petition in good faith for the purpose of ending the marriage. |
| | (4) \square Counseling will not save the marriage. If counseling may save the marriage, do not check (4). |
| F. | Respondent's status |
| | Check each that is true |
| | (1) Respondent (you are Respondent) is in the military service. |
| | If you check (1), note that there are special rules that may prevent this dissolution from going forward if you are in the military. You should talk to an attorney. |
| | (2) Respondent is in prison or jail at in in State |
| | If you are in prison or jail, you may be entitled to a "guardian ad litem," a person, usually an |
| | attorney, appointed to protect the interests of a spouse in some cases. |
| G. | Protective or no contact orders Check one |
| | (1) There is neither a "protective order" nor a "no contact order" between Respondent (you) and |
| | Petitioner (your spouse). |
| | (2) O There is a "protective order" or "no contact order" between Respondent and Petitioner. |
| | If you check (2), fill in the following information: |
| | a. County and state where the order came from: |
| | · |
| | b. Court case number: |
| H. | Respondent denies anything in the Petition that Respondent has not agreed is correct. |
| I. | Other information: |
| | |

 $Rule\ 17.100 - Form\ 115: Answer\ to\ Petition\ for\ Dissolution\ of\ Marriage\ with\ no\ Minor\ or\ Dependent\ Adult\ Children,\ continued$

3. Respondent's Request

| A. | Check a | condent asks the court to: k all that apply. The court will only consider items that are checked. | | | | | |
|----|--|--|--|--|--|--|--|
| | If you do not know what you want, talk to an attorney. | | | | | | |
| | (1) |) 🔲 End the marriage of Respondent (you) and Petitioner (your spouse). | | | | | |
| | (2) | Fairly divide the property and the debts of the parties. | | | | | |
| | (3) | s) | | | | | |
| | (4) | (4) Order that Petitioner pay for Respondent's attorney's fees before the divorce is final If you check (4), you must file form 122. | | | | | |
| | (5) | Order that Petitioner pay spousal support (alimony) to Respondent. If you check (5), you must file form 122. | | | | | |
| | (6) | Change Respondent's last name to: Name can only be changed to name on birth certificate or name used immediately prior to the marriage. | | | | | |
| | | Print your former or birth name | | | | | |
| В. | □ Ot | her request: | | | | | |

 $Rule\ 17.100 - Form\ 115: Answer\ to\ Petition\ for\ Dissolution\ of\ Marriage\ with\ no\ Minor\ or\ Dependent\ Adult\ Children,\ continued\ Adult\ Children,\ Continued\ Adult\ Children,\ Continued\ Children,\ Children$

| 4. | Attori Check of | ney Help | | | | | | |
|----|--------------------|---|-----------------|------------------|-------------------|---|-----------------------|--------------------------|
| | $\overline{}$ | | , did not ho | In ma nran | 010 01 | fill in this paper | | |
| | $\tilde{}$ | - | | | | fill in this paper | | |
| | В. () | An attorney If you check I | • | | | | | |
| | | Name of attor | nev or organ | ization. if an | v | Attorney's P.I.N. | # – Ask the attor | nev |
| | | | , | , y, | <u></u> | | | |
| | | Business add | ress of attorn | ey or organiz | ation | City | State | ZIP code |
| | | () Attorney's ph | one number | (Attorn |) _ ney 's fax | c number – optional | Attorney's em | ail address – optional |
| 5. | Servi | ce Instruct | ions | | | | | |
| | - | oondent is fil | ling in pape | r | | | | |
| | Check o | | النبية | haamiaa af | مار در داد | | mas da a alabra a a l | inted above or |
| | \simeq | | _ | | | nents at the attor | _ | |
| | В. О | Responden | t will accept | service of o | docum | ents in this case | at the mailing a | ddress below. |
| 6. | Section | | ted only if fil | ing in paper o | or if the | elivery other party is exen be served on regisi | | c filing. |
| | I, | | | | _, certi | fy that on | | , 20 |
| | | - | | | | | | • |
| | I maile | _ | copy of this | s Answer to | the o | ther party or the | other party's | attorney at this |
| | | | | | | | | |
| | Name o | f person to who | om I delivered | d or mailed it | | | | |
| | Party's | or attorney's r | nailing addre | SS | - City | | State | ZIP code |
| 7. | Oath | and Signat | ture | | | | | |
| | I, | | | | _, have | e read this Answ | er, and I certif | y under penalty |
| | | your name | | laum af the | - 04-4 | | - :fti | الممادة والمادة والمادة |
| | | ury and purs Answer is tr | | | e State | e of lowa that the | e information i | nave provided |
| | | | | . 20 | | | | |
| | Signed | on: Month | Day | Year | You | r signature* | | |
| | Mailing | address | | | City | | State | ZIP code |
| | (| | | | | | | |
| | Phone r | number | | nail address | | | ditional email add | |
| | | er filing electroi he form after sig | ning it and the | n file electroni | cally | te your signature on t ng this form on ne | | e filing electronically, |

Instructions for Rule 17.100—Form 115: Answer to Petition for Dissolution of Marriage with no Minor or Dependent Adult Children, continued

Do not file these instructions

Instructions for Filing an Answer to a Petition for Dissolution of Marriage

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

■ Filing your Answer electronically

- If your divorce case was filed in a county that uses electronic filing, you must register to electronically
 file. For help with registration, see the eFiler's User Guide <u>How to Register Pro Se (Self Represented)</u>
 for eFiling on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you
 when you electronically file.)
- Log in to EDMS on the Iowa Judicial Branch website and file your Answer.
 The login page can be accessed from two different paths: you may <u>directly log in to EDMS</u>; or from the judicial branch website menu, you may select "eFiling > eFile (EDMS) Login."
- For help, see How to eFile to an Existing Case.
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling of
 your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My
 Filings, correct the error, and resubmit your Answer. For help, see <u>How to Resubmit a Returned Filing</u>.
- The NEF will indicate if your spouse is exempt from electronic filing requirements, in which case, you must
 mail or serve in paper a copy of the document on your spouse if he or she does not have an attorney.

Filing your Answer in paper

- Make two photocopies of the original.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where
 the Petition was filed. The county is listed at the top of the Petition (form 101).
- · The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- · Keep one of the copies for your records.
- Serve one of the copies of your Answer on your spouse (Petitioner).
- You can hand one of the copies of the Answer form to your spouse, or mail a copy to your spouse at the address shown on the Petition.
- If your spouse has an attorney, you should serve the Answer by mailing a copy to the attorney at the attorney's address on the Petition if box 5B on the Petition is checked.

Do not file these instructions

November 2013

Rule 17.100-Form 116: General Answer to a Petition

Respondent must file an Answer within 20 days after receiving the Petition and Original Notice, or the court may enter a judgment against Respondent giving Petitioner what he or she asked for in the Petition.

If the Petition you received is on form 101, use form 115 for your Answer.

Read the <u>Guide to Representing Yourself in an Iowa Divorce Case</u> on the Iowa Judicial Branch website before using this form.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (111).
- If filing in paper, you may use form 111 to provide any protected information in full.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the Iowa District Court for | County where Petition is filed |
|---|--------------------------------|
| Upon the Petition of | Equity case no |
| Petitioner Your spouse's full name: first, middle, last | General Answer to a Petition |
| and concerning | |
| Respondent Your full name: first, middle, last | |

- 1. Respondent's Answer You are Respondent.
 - A. Respondent admits that the following paragraphs in the Petition are true:

List the numbers of the paragraphs in the Petition that you think are true. If you decide later that the paragraphs you list here are not true, it may be too late to change your answer.

- B. Respondent denies that the following paragraphs in the Petition are true:
- C. Respondent does not know whether the following paragraphs in the Petition are true: List the numbers of the paragraphs in the Petition that you are not sure about. If you cannot say a paragraph or a part of a paragraph is true or not true, it may be because you do not know how something, such as a date, place, or when something happened.

Rule 17.100-Form 116: General Answer to a Petition, continued

| D. | Protect | tive | or no contact orders | | | | |
|----|---|------|---|--------|--|--|--|
| | Check of | ne | | | | | |
| | (1) There is neither a "protective order" nor a "no contact order" between Respondent (you) at Petitioner (your spouse). | | | | | | |
| | (2) 🔘 | | ere is a "protective order" or "no contact order" between Respondent and Petit ou check (2), fill in the following information: | ioner. | | | |
| | | a. | County and state where the order came from: | | | | |
| | | | County | State | | | |
| | | b. | Court case number: | | | | |
| E. | Respo | nde | nt denies anything in the Petition that is not admitted in this Answer | | | | |
| F. | Other i | nfo | rmation: | | | | |
| | | | | | | | |
| | | | | | | | |

2. Respondent's Request If you do not know what you want, talk to an attorney.

Respondent asks the court to: Write here what you would like the court to do. For example, tell the court if you want a divorce. Be brief. Do not write long descriptions.

3. Attorney Help

Rule 17.100—Form 116: General Answer to a Petition, continued

| | Name of attorney or organize | ation, if any | Attorney's P.I.N. | #-Ask the attorn | неу |
|----------------------------------|--|--|---|---|--|
| | Business address of attorney | or organization | City | State | ZIP code |
| | ()_ Attorney's phone number | () . Attorney's fa | x number – optional | Attorney's ema | il address – option |
| Serv | ice Instructions | , , | • | , | • |
| | spondent is filing in paper | | | | |
| Check | | | | | |
| A. (| Respondent will accept s | service of docu | ments at the attor | rney's address | listed above; o |
| в. С | Respondent will accept s | | | - | |
| | | | | a | |
| | fication of Service by 15 to be completed only if filing | | | nt from electronic | filina |
| Decuo. | i o de completea onty ij jiting | in puper or ij ine | omer party is exem | pi jrom electronic | jung. |
| This d | ocument, if filed electronically, | will automatically | be served on registe | ered parties. | |
| This d | ocument, if filed electronically, | will automatically | be served on registe | | 20 |
| This d | ocument, if filed electronically, t your name | will automatically | be served on registe | | , 20 <u>Year</u> |
| This d | ocument, if filed electronically, t your name | will automatically , cert | be served on register ify that on Month | Day | |
| This d | ocument, if filed electronically, t your name ed or gave a copy of this h | will automatically , cert | be served on register ify that on Month | Day | |
| I, Prin | ocument, if filed electronically, t your name ed or gave a copy of this h | will automatically , cert | be served on register ify that on Month | Day | |
| I, Prin I mail addre | ocument, if filed electronically, t your name ed or gave a copy of this h | will automatically, cert Answer to the o | be served on register ify that on Month | Day | |
| I, Prin I mail addre | ocument, if filed electronically, t your name ed or gave a copy of this theses: | will automatically, cert Answer to the o | be served on register ify that on Month | Day | |
| I, | ocument, if filed electronically, t your name ed or gave a copy of this theses: | will automatically, cert Answer to the o | ify that on Month other party or the | Day | |
| I mail address | tyour name ed or gave a copy of this tess: of person to whom I delivered of sor attorney's mailing address | will automatically, cert Answer to the correct or mailed it | ify that on Month other party or the | other party's a | ttorney at this |
| In mail address | ocument, if filed electronically, t your name ed or gave a copy of this h ess: of person to whom I delivered of | will automatically, cert Answer to the corr mailed it | ify that on | other party's a | ttorney at this |
| This d I, | ocument, if filed electronically, it your name ed or gave a copy of this ress: of person to whom I delivered on a copy of this ress: s or attorney's mailing address and Signature | will automatically, cert Answer to the corr mailed it | ify that on Month other party or the | other party's a | ttorney at this |
| This d | t your name ed or gave a copy of this tess: of person to whom I delivered of sor attorney's mailing address and Signature | will automatically | ify that on | other party's a State | ttorney at this |
| This d I, | t your name ed or gave a copy of this tests: of person to whom I delivered of sor attorney's mailing address and Signature it your name | Answer to the control of the control | ify that on | other party's a State | ttorney at this |
| This d I, | t your name ed or gave a copy of this tess: of person to whom I delivered of sor attorney's mailing address and Signature | Answer to the control of the control | ify that on | other party's a State | ttorney at this ZIP code under penalt |
| Inail address Name Party Oath I, | et your name ed or gave a copy of this ress: of person to whom I delivered of a copy of this ress: and Signature t your name rjury and pursuant to the lass Answer is true and corre | Answer to the control of the State ct, 20 | e read this Answee | other party's a State | ttorney at this ZIP code under penalt |
| This d I, | et your name ed or gave a copy of this ress: of person to whom I delivered of a copy of this ress: and Signature t your name rjury and pursuant to the lass Answer is true and corre | Answer to the control of the control | ify that on | other party's a State | ttorney at this ZIP code under penalt |
| This d I, | t your name ed or gave a copy of this tests: of person to whom I delivered of a copy of this a c | Answer to the common of the State of the Sta | e read this Answer of lower signature* | other party's a State er, and I certify e information I h | ttorney at this ZIP code under penalt nave provided |
| This d I, | et your name ed or gave a copy of this ress: of person to whom I delivered of a copy of this ress: and Signature t your name rjury and pursuant to the lass Answer is true and corre | Answer to the common of the State of the Sta | e read this Answee | other party's a State | ttorney at this |

Instructions for Rule 17.100-Form 116: General Answer to a Petition, continued

Do not file these instructions

Instructions for Filing an Answer to a Petition for Dissolution of Marriage

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

☐ Filing your Answer electronically

- If your divorce case was filed in a county that uses electronic filing, you must register to electronically file.
 For help with registration, see the eFiler's User Guide <u>How to Register Pro Se (Self Represented) for eFiling</u> on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you when
 you electronically file.)
- Log in to EDMS on the Iowa Judicial Branch website and file your Answer.
 The login page can be accessed from two different paths: you may <u>directly log in to EDMS</u>; or from the judicial branch website menu, you may select "eFiling > eFile (EDMS) Login."
- For help, see <u>How to eFile to an Existing Case</u>.
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling of
 your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My
 Filings, correct the error, and resubmit your Answer. For help, see <u>How to Resubmit a Returned Filing</u>.
- The NEF will indicate if your spouse is exempt from electronic filing requirements, in which case, you must
 mail or serve in paper a copy of the document on your spouse if he or she does not have an attorney.

Filing your Answer in paper

- · Make two photocopies of the original.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where
 the Petition was filed. The county is listed at the top of the Petition (form 101).
- The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- · Keep one of the copies for your records.
- Serve one of the copies of your Answer on your spouse (Petitioner).
- You can hand one of the copies of the Answer form to your spouse, or mail a copy to your spouse at the address shown on the Petition.
- If your spouse has an attorney, you may serve the Petition by mailing a copy to the attorney at the
 attorney's address on the Petition if box 5B on the Petition is checked.

Do not file these instructions

November 2013 Instructions for Rule 17.100—Form 116

Page 1 of 1

[Court Order May 16, 2007; November 6, 2013]

Forms 117 to 121: Reserved

Rule 17.100—Form 122: Motion in a Dissolution of Marriage with no Minor or Dependent Adult Children

Use this form if you want to ask the court to do something after your court case has already started.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| Equity case no. Motion in a Dissolution of Marriage with no Minor or Dependent Adult Children | he lowa District Court for | County where your case is filed | Cour |
|---|--|--|------------|
| Marriage with no Minor or Dependent Adult Children Respondent Full name: first, middle, last am Check one A Petitioner B. Respondent A I ask the court to Check all that apply. If you check any box in A, you must tell the court why you are making this request: (1) Change the hearing date that has been set for (2) Order counseling (conciliation). (3) Set a hearing date for a divorce Decree by default. (4) Award me attorney's fees before the divorce is final. (5) Award spousal support (alimony) to me before the divorce Decree. (7) Other request Explain | oon the Petition of | Equity case no. | |
| Respondent Full name: first, middle, last am Check one A. Petitioner B. Respondent 1. Request A. I ask the court to Check all that apply. If you check any box in A, you must tell the court why you are making this request: (1) Change the hearing date that has been set for (2) Order counseling (conciliation). (3) Set a hearing date for a divorce Decree by default. (4) Award me attorney's fees before the divorce is final. (5) Award spousal support (alimony) to me before the divorce is final. (6) Shorten the 90-day waiting period for getting a divorce Decree. (7) Other request Explain | titioner Full name: first, middle, last | Marriage with no | o Minor or |
| am Check one A. Petitioner B. Respondent I. Request A. I ask the court to Check all that apply. If you check any box in A, you must tell the court why you are making this request: (1) Change the hearing date that has been set for | d concerning | | |
| A. O Petitioner B. O Respondent I. Request A. I ask the court to Check all that apply. If you check any box in A, you must tell the court why you are making this request: (1) Change the hearing date that has been set for (2) Order counseling (conciliation). (3) Set a hearing date for a divorce Decree by default. (4) Award me attorney's fees before the divorce is final. (5) Award spousal support (alimony) to me before the divorce is final. (6) Shorten the 90-day waiting period for getting a divorce Decree. (7) Other request Explain | spondent Full name: first, middle, last | | |
| (2) Order counseling (conciliation). (3) Set a hearing date for a divorce Decree by default. (4) Award me attorney's fees before the divorce is final. (5) Award spousal support (alimony) to me before the divorce is final. (6) Shorten the 90-day waiting period for getting a divorce Decree. (7) Other request Explain | B. Respondent Request A. I ask the court to Check all that apply. If you check any to | | |
| (6) Shorten the 90-day waiting period for getting a divorce Decree. (7) Other request Explain | (2) ☐ Order counseling (concilia (3) ☐ Set a hearing date for a d | Month ation). divorce Decree by default. | |
| B. I am making the request(s) in this Motion because: | (6) Shorten the 90-day waitin | • • | |
| | B. I am making the request(s) in t | this Motion because: | |

Rule 17.100—Form 122: Motion in a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

| 2. | Attorney Help | | | | |
|-----|---|--------------|---------------------|----------------------|------------------------|
| | Check one | | | | |
| | A. An attorney did not help me prep | oare or fil | l in this paper. | | |
| | B. An attorney helped me prepare of If you check B, you must fill in the follo | | | | |
| | Name of attorney or organization, if an | | Attornev's P I N | # - Ask the attorn | 100 |
| | name of attorney or organization, if an | , . | 1110/11cy 51 .1.11. | n 115h tite ditori | .c.y |
| | Business address of attorney or organiz | zation | City | State | ZIP code |
| | () (| nev's far n | umher – antional | Attornev's ema | il address - ontional |
| | | | | Thorney 5 oma | optiona |
| 3. | Certification of Service by Mailing Section 3 to be completed only if filing in paper of | or if the ot | her party is exem | | filing. |
| | This document, if filed electronically, will autom | | _ | _ | |
| | l, | _, certify | that on | | , 20 |
| | | | | | |
| | I mailed or gave a copy of this Motion to address: | tne otne | er party or the | otner party's at | torney at this |
| | address. | | | | |
| | | - | | | |
| | Name of person to whom I delivered or mailed it | t | | | |
| | | | | | |
| | Party's or attorney's mailing address | City | | State | ZIP code |
| 1 | Oath and Signature | | | | |
| 4. | | | | | |
| | l, Print your name | _, have re | ead this Motior | ı, and I certify ur | nder penalty of |
| | perjury and pursuant to the laws of the Sta | ate of lov | a that the info | rmation I have n | rovided in this |
| | Motion is true and correct. | ate or lov | va triat trie iriio | mation mave p | TOVIDED III LIIIS |
| | Wolfor is true and someon. | | | | |
| | , 20 | Your si | | | |
| | Signed on: Month Day Year | Your st | gnature* | | |
| | Mailing address | City | | State | ZIP code |
| | (| | | | |
| | Phone number Email address | | Add | litional email addr | ess – if available |
| | * 777 -1 -01- 1 11 | | | | A1. 1 |
| | * Whether filing electronically or in paper, you must scan the form after signing it and then file electroni | | our signature on t | his form. If you are | filing electronically, |
| | sear me joint after signing it and men fire electronic | cusy. | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Nov | vember 2013 Rul | le 17.100— | Form 122 | | Page 2 of 2 |

Rule 17.100-Form 123: Response to a Motion

Use this form if your spouse has filed a Motion (most likely form 122) and you disagree with what your spouse is asking the court to do in that Motion.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the Iowa District Court for | County Where your case is filed |
|---|---------------------------------|
| Upon the Petition of | Equity case no |
| Petitioner Full name: first, middle, last | Response to a Motion |
| and concerning | |
| Respondent Full name: first, middle, last | |
| why you disagree with the request in C. (1) Change the hearing date that had (2) Order counseling (conciliation). (3) Set a hearing date for a divorce (4) Award my spouse attorney's fee | as been set for |

Rule 17.100—Form 123: Response to a Motion, continued

| C. I disagree with the Motion because: | |
|--|--|

Page 3 of 3

Rule 17.100-Form 123: Response to a Motion, continued

| 3. | Attorney Help Check one | | | | |
|----|---|--|--|---------------------------|--------------------------|
| | | holp mo pro | naro or fill in this na | por | |
| | A. An attorney did notB. An attorney helped | | | per. | |
| | If you check B, you mu | | | | |
| | Name of attorney or or | ganization, if a | ny Attorney's P.I. | N. # $ Ask$ the attorn | rey |
| | Business address of att | torney or organ | ization City | State | ZIP code |
| | () | (_ | nney's fax number – optio | | |
| | Attorney's phone numb | oer Attor | rney 's fax number – optio | nal Attorney's en | 1ail address – optiona |
| | Certification of Service Section 4 to be completed only in This document, if filed electronic | f filing in paper cally, will autor | r or if the other party is a matically be served on r | egistered parties. | |
| | I, | | , certify that on | | , 20 |
| | Print your name I mailed or gave a copy of | | | | • |
| | Party's or attorney's mailing ac | ldress | City | State | ZIP code |
| 5. | Oath and Signature | | | | |
| | I, | | , have read this R | esponse, and I ce | ertify under |
| | Print your name | uant ta tha lav | um of the Otate of law | um that I have room | I this Desmanss |
| | penalty of perjury and pursand that the information I had | | | | this Response |
| | | , 20 | Your signature* | | |
| | Signed on: Month Day | Year | Your signature* | | |
| | Mailing address | | City | State | ZIP code |
| | () Phone number | Email addres | | Additional email ad | dress _ if available |
| | 1 none number | Eman accores | ມ | maniforal email ac | ar ess – ij avanavie |
| | * Whether filing electronically or i scan the form after signing it and | | | e on this form. If you ar | e filing electronically, |
| | | | | | |
| | | | | | |

Rule 17.100—Form 123

November 2013

Rule 17.100—Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children

Caution: This form may require you to provide protected or sensitive information. Each party must complete one of these forms.

- 💂 If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (111) if you have not already done so.
- If filing in paper, you may use form 111 to provide any protected information in full if you have not already done so.

| If you do not understand how to use this f | form, or if you | ı should use this for | m, talk to an attorney. | |
|---|-----------------|---|--|--|
| In the Iowa District Court for | | County where | your case is filed | County |
| Upon the Petition of | | Equity ca | ase no. | |
| Petitioner Full name: first, middle, last | | | inancial Affidavit f bissolution of Marr with no Minor o | iage |
| and concerning | | De | pendent Adult Chi | |
| Respondent Full name: first, middle, | last | - | | |
| l am | | • | | |
| Check one | | | | |
| A. O Petitioner | | | | |
| B. Respondent | | | | |
| I. | | state that thi | s is a true and comple | ete statement |
| Print your name | | | · | |
| of my assets, debts, a | nd present | income as of th | eday of | , 20 |
| 1. Assets Things you and your spo | | | Day Monin | 1eur |
| A. Real estate Attach additional sheets if nece: *Owner (Whose name is on the | ssary. | Petitioner $R = Re$ | espondent J=Joint (Both | n) |
| Type of real estate | Owner* | Market value What it would sell for | Debt Total amount you still owe on it and to whom owed | Net value Market value minus debt owed |
| (1) Homestead Address | | | ¢. | |
| | | \$ | \$ to: | \$ |
| (2) Other real estate Address | | \$ | \$ | \$ |
| | 1 | | to: | |

Check this box if you have attached a sheet with additional information on other assets.

Rule 17.100—Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

B. Vehicles

Includes cars, trucks, motorcycles, and other motorized vehicles.

*Owner (Whose name is on the car or vehicle title?): P = Petitioner R = Respondent J = Joint (Both)

| Vehicles Make (e.g. Ford) Year | Owner* | Market value What it would sell for | Debt Total amount you still owe on it and to whom owed | Net Value Market value minus debt owed |
|--------------------------------------|--------|-------------------------------------|--|--|
| (1) | | \$ | \$ | \$ |
| | | Ψ | to: | Ψ |
| (2) | | \$ | \$ | \$ |
| | | | to: | Ψ |
| (3) | | c | \$ | 6 |
| | | \$ | to: | \$ |

Check this box if you have attached a sheet with additional information on other vehicles.

C. Securities, stocks, & bonds

*Owner (Whose name is on the securities, stocks, or bonds?):

P = Petitioner R = Respondent J = Joint (Both)

| Securities, stocks, & bonds Company name | Owner* | Market value What it would sell for | Debt Total amount you still owe on it and to whom owed | Net value Market value minus debt owed |
|--|--------|---|--|--|
| (1) | | \$ | \$ | \$ |
| | | Ψ | to: | Ψ . |
| (2) | | \$ | \$ | \$ |
| (2) | | Φ | to: | Φ |
| (2) | | ¢ | \$ | \$ |
| (3) | | \$ | to: | D |

Check this box if you have attached a sheet with additional information on other securities, stocks, & bonds.

D. Life insurance

*Owner (Whose name is on the policy?): P = Petitioner R = Respondent J = Joint (Both)

| Life insurance Company name | Owner* P,R,J | Cash value Not death benefit | Loan from cash value Total amount still owed on loan | Cash value Minus loan owed |
|--------------------------------|-----------------|---------------------------------|---|----------------------------------|
| (1) | | \$ | \$ | \$ |
| (2) | | \$ | \$ | \$ |
| (3) | | \$ | \$ | \$ |

[☐] Check this box if you have attached a sheet with additional information on life insurance.

Rule 17.100—Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

E. Bank accounts

*Owner (Whose name is on the checking or savings account?): P = Petitioner R = Respondent J = Joint (Both)

| Checking & savings accounts Bank or Credit Union name If you do not use bank accounts, write "Cash" | Owner* | Cash value | Personal loans or overdraft accounts Total amount you still owe on it | Net value Cash value minus loan / overdraft owed |
|---|--------|------------|--|---|
| (1) | | \$ | \$ | \$ |
| (2) | | \$ | \$ | \$ |
| (3) | | \$ | \$ | \$ |

Check this box if you have attached a sheet with additional information on other checking & savings accounts.

F. Household

*Owner: P = Petitioner R = Respondent J = Joint (Both)

| Household contents Describe | Owner* | Market value What it would sell for | Debt Total amount you still owe on it and to whom owed | Net value Market value minus debt owed |
|------------------------------|--------|---|--|--|
| (1) Furniture a. | | \$ | \$ | \$ |
| a. | | | to: | |
| b. | | \$ | \$ | \$ |
| | | | to: | |
| C. | | \$ | \$ | \$ |
| | | | to: | |
| d. | | \$ | to: | \$ |
| (2) Appliances / Electronics | | | \$ | |
| a. | | \$ | to: | \$ |
| h | | \$ | \$ | \$ |
| b. | | Φ | to: | Φ |
| C. | | \$ | \$ | \$ |
| O. | | Ψ | to: | Ψ |
| d. | | \$ | \$ | \$ |
| | | , | to: | Ť |
| (3) Other contents | | \$ | \$ | \$ |
| a. | | | to: | Ť |

Rule 17.100—Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

| b. | \$ | \$ to: | \$ |
|----|----|--------|----|
| C. | \$ | \$ to: | \$ |

Check this box if you have attached a sheet with additional information on other household assets.

G. Retirement assets

*Owner (Whose name is on the retirement account?): P = Petitioner R = Respondent J = Joint (Both)

| Retirement assets Examples: Pensions, IRAs, 401(k)s, annuities, etc. | Owner* | Market value What it would sell for | Loan from retirement account Total amount you still owe on it and to whom owed | Net value Market value minus loan owed |
|--|--------|---|--|---|
| (1) | | \$ | \$ to: | \$ |
| (2) | | \$ | \$ to: | \$ |
| (3) | | \$ | \$ to: | \$ |

Check this box if you have attached a sheet with additional information on other retirement assets.

H. Other assets

Items not listed in the other boxes should be listed here. For example: jewelry, furs, guns, sporting goods, farm animals.

*Owner: P = Petitioner R = Respondent J = Joint (Both)

| Other assets Describe | Owner* | Market value What it would sell for | Debt Total amount you still owe on it and to whom owed | Net value Market value minus debt owed |
|------------------------|--------|---|--|--|
| (1) | | \$ | \$ | \$ |
| (1) | | Ψ | to: | • |
| (2) | | \$ | \$ | \$ |
| (2) | | Φ | to: | Ψ |
| (2) | | ¢ | \$ | ¢ |
| (3) | | \$ | to: | \$ |

Check this box if you have attached a sheet with additional information on other assets.

Rule 17.100—Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

Totals

| (1) Total from attached sheets | Listed in 1A-H. | \$ |
|--------------------------------|-----------------|----|
| (2) Total net value of assets | Listed in 1A-H. | \$ |

2. Other Debts Debts may include things such as past due balances on utilities, money owed to a landlord for damages after moving, credit card debt, and loans from friends, family, or banks.

*Whose debt is it? P = Petitioner R = Respondent J = Joint (Both)

| Other debts List only those not included as "debt" or "loans" under "Assets" in part 1. | Whose debt?* | Amount owed |
|--|--------------|-------------|
| (1) | | \$ |
| (2) | | \$ |
| (3) | | \$ |
| (4) | | \$ |
| (5) | | \$ |
| (6) | | \$ |
| (7) | | \$ |
| (8) | | \$ |
| (9) | | \$ |
| (10) | | \$ |
| (11) | | \$ |
| (12) | | \$ |
| (13) | | \$ |
| (14) | | \$ |
| (15) | | \$ |
| Check this box if you have attached a sheet with additional information on other debts, and enter the total. | • | \$ |
| Total other debts Including amounts shown on attached sheet, if any. | | \$ |

Rule 17.100—Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

3. Income and Deductions

A. Petitioner's Income and Deductions If you are Respondent, give your best estimate for each amount.

*How often is income paid or deduction taken?

 $W = Weekly \ B = Bi$ -weekly (every other week) $M = Monthly \ T = Two times a month$

| Comment in a case and deductions | In | come | Ded | uctions |
|---|---------------------------|--------------------------------------|----------------------------|---------------------|
| Current income and deductions for Petitioner Sources of income and deductions | How often paid?* W,B,M,T | Gross amount Before deductions | How often taken?* W,B,M,T | Amount of deduction |
| (1) Wages from employer Employer name: Job title: | | \$ | | \$ |
| (2) Wages from employer Employer name: Job title: | | \$ | | \$ |
| (3) Unemployment assistance | | \$ | | \$ |
| (4) Family Investment Program | | \$ | | \$ |
| (5) Social Security | | \$ | | \$ |
| (6) Other Identify: | | \$ | | \$ |
| (7) Other <i>Identify:</i> | | \$ | | \$ |
| (8) Other <i>Identify:</i> | | \$ | | \$ |
| (9) Totals from attached sheets, if any Check this box if you have attached a sheet with additional information on Petitioner's income and deductions. | | \$ | | \$ |
| Totals Current income and deductions for Petitioner | | \$ Income total | | \$ Deductions total |

 $Rule\ 17.100 - Form\ 124: \textit{Financial Affidavit for a Dissolution of Marriage with no \textit{Minor or Dependent Adult Children}, continued to the property of the$

B. Respondent's Income and Deductions If you are Petitioner, give your best estimate for each amount. *How often is income paid or deduction taken?

 $W = Weekly \ B = Bi$ -weekly (every other week) $M = Monthly \ T = Two \ times \ a \ month$

| | In | come | Ded | uctions |
|---|--------------------------|--------------------------------------|------------------------------------|---------------------|
| Current income and deductions for Respondent Sources of income and deductions | How often paid?* W,B,M,T | Gross amount Before deductions | How often taken?* W,B,M,T | Amount of deduction |
| (1) Wages from employer Employer name: Job title: | | \$ | | \$ |
| (2) Wages from employer Employer name: Job title: | | \$ | | \$ |
| (3) Unemployment assistance | | \$ | | \$ |
| (4) Family Investment Program | | \$ | | \$ |
| (5) Social Security | | \$ | | \$ |
| (6) Other <i>Identify:</i> | | \$ | | \$ |
| (7) Other <i>Identify:</i> | | \$ | | \$ |
| (8) Other <i>Identify:</i> | | \$ | | \$ |
| (9) Totals from attached sheets, if any Check this box if you have attached a sheet with additional information on Respondent's income and deductions. | | \$ | | \$ |
| Totals Current income and deductions for Respondent | | \$ Income total | | \$ Deductions total |

4. Expenses

A. Living arrangements

| Check o | one |
|---------|--|
| (1) | My spouse and I live in the same home. |
| (2) | My spouse and I do not live in the same home |

Rule 17.100—Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

B. My expenses

Note: You must complete this section if you or your spouse wants spousal support (alimony). *How often paid?: $W = Weekly \ B = Bi\text{-weekly}$ (every other week) M = Monthly

T = Two times a month A = Annually

| Type of expense | Paid to | How often paid?* W,B,M,T,A | Monthly payment |
|---|---------|----------------------------|-----------------|
| (1) House payment or rent | | | \$ |
| (2) Food At home & restaurants | | | \$ |
| (3) Transportation (gas, bus fare) Not car loan payments – see (12). | | | \$ |
| (4) Clothing | | | \$ |
| (5) Medical, dental Not health insurance payments – see 4B(10). | | | \$ |
| (6) Utilities (gas, electric) | | | \$ |
| (7) Phone | | | \$ |
| (8) Cable / satellite television / internet | | | \$ |
| (9) Car insurance payment | | | \$ |
| (10) Health insurance payment | | | \$ |
| (11) Credit card payments | | | \$ |
| (12) Car loan payments | | | \$ |
| (13) Other loan payments | | | \$ |
| (14) Other expense Identify: | | | \$ |
| (15) Other expense Identify: | | | \$ |
| (16) Other expense Identify: | | | \$ |
| (17) Totals from attached sheets, if any Check this box if you have attached a sheet with additional information on your expenses. | | | \$ |
| Total expenses | | | \$ |

Page 9 of 9

 $Rule\ 17.100 - Form\ 124: \textit{Financial Affidavit for a Dissolution of Marriage with no \textit{Minor or Dependent Adult Children}, continued and the property of th$

| 5. | Attorney Help Check one | | | | | | | |
|----|--|-----------------------|----------|-------------------|--------------|------------------|-----------------------|--|
| | A. An attorney did no | t help me prepa | are or | fill in this par | oer. | | | |
| | B. An attorney helped If you check B, you mi | d me prepare or | fill in | this paper. | | | | |
| | Name of attorney or o | rganization, if any | | Attorney's P. | I.N. # – As | sk the attori | ney | |
| | Business address of at | torney or organiza | tion | City | | State | ZIP code | |
| | () Attorney's phone num | ber (| y's fax | : number – option | al Atto | orney's ema | til address – option | |
| 6. | Certification of Service Section 6 to be completed only This document, if filed electron | if filing in paper or | r if the | other party is e | | | e filing. | |
| | 1 | | certif | fy that on | | | , 20 | |
| | l, Print your name | | Certi | Mo | nth | \overline{Dan} | , 20 V Year | |
| | Party's or attorney's mailing a | ddress | City | | | - State | ZIP code | |
| 7. | Oath and Signature | | | | | | | |
| | I, | | , have | read this Fir | nancial A | ffida∨it, a | nd I certify | |
| | under penalty of perjury ar Financial Affidavit and that | the information | l have | provided in i | | | | |
| | Signed on: Month Day | Year | Your | signature* | | | | |
| | Mailing address | | City | | | State | ZIP code | |
| | Phone number | Email address | | | Additional | email addi | ress – if available | |
| | * Whether filing electronically or scan the form after signing it an | | | te your signature | on this form | ı. If you are | filing electronically | |
| | | | | | | | | |

Rule 17.100—Form 124

November 2013

Rule 17.100—Form 125: Affidavit of Mailing Notice

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the Iowa District Court for | County where your case is filed |
|--|---|
| Upon the Petition of Petitioner Full name: first, middle, last and concerning | Equity case noAffidavit of Mailing Notice |
| Attorney Help Check one A. An attorney did not help me prepare B. An attorney helped me prepare or fill If you check B, you must fill in the following | in this paper. |
| Name of attorney or organization, if any | Attorney's P.I.N. $\#$ – Ask the attorney |
| Business address of attorney or organization | City State ZIP code |

Important Notice to Petitioner

Petitioner **must** file this if he or she served Notice by Publication in a newspaper and asks the court for a divorce Decree by default. Petitioner **must** also complete the oath and signature section on the next page.

Petitioner's Oath and Signature on next page

Rule 17.100-Form 125: Affidavit of Mailing Notice, continued

| Petitioner's Oath and Si | ignature | | | | | | |
|--------------------------------|--|------------------------|-----------------|--|--|--|--|
| I, | , certify under per | nalty of perjury and p | oursuant to the | | | | |
| Print your name | | | | | | | |
| laws of the State of Iowa that | at on the day of | , 20, I se | ent by ordinary | | | | |
| | Day Month | Year | | | | | |
| | ne following paper or papers: | | | | | | |
| Check one | | | | | | | |
| Original Notice and Pet | ition for Dissolution of Marriage, | or | | | | | |
| Notice of Intent to File | a Written Application for Default I | Dooroo | | | | | |
| O Notice of Intent to File a | a viniten Application for Default | Decree | | | | | |
| to Respondent's last-known | address as follows: | | | | | | |
| | | | _ | | | | |
| Respondent's street address | City | State | GTP 1 | | | | |
| Respondent s street address | City | State | ZIP code | | | | |
| Respondent s street address | City | State | ZIP code | | | | |
| respondent s sireet address | | State | ZIP code | | | | |
| Respondent's street address | , | State | ZIP code | | | | |
| | , 20 | | ZIP code | | | | |
| | , | | ZIP code | | | | |
| Signed on: Month Day | , 20 Year Petitioner's signa | iture* | | | | | |
| | , 20 | | ZIP code | | | | |
| Signed on: Month Day | , 20 Year Petitioner's signa | iture* | | | | | |

^{*} Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.

Rule 17.100—Form 126: Notice of Intent to File Written Application for Default Decree

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the | lowa District Court for | | | | County |
|------------------|--|----------------------------------|-------------------------------------|---------------|---------------|
| | | Coun | ty where your case is filed | | |
| Upon | the Petition of | | Equity case no. | | |
| Petiti | oner Full name: first, middle, last | | Notice of Intent Application for | | |
| and co | oncerning | | | | |
| Resp | ondent Full name: first, middle, last | | | | |
| To: _ | espondent's first name Middle | | | | |
| R_{i} | espondent's first name Middle | e name | Last name | | |
| Date o | of Notice: | <u>Day</u> , 20 | | | |
| | Month | Day 1 | ⁷ ear | | |
| | Importa | int Notice to | Respondent: | | |
| | You are in default because you as you act within 10 days from the ce entered against you without a hea You shoul | date of this No ring, and you | tice, a Default Decree of | Dissolutio | n of Marriage |
| | | , | s/ | | |
| | ritten signature of Petitioner or attorne in paper | y or | SI | etitioner or | Attorney |
| The per | son who provided the signature above i | must fill in the | information below. | | |
| \overline{Pre} | esent street address (If attorney, firm ac | ddress) Cit | y | State | ZIP code |
| (|) | | | | |
| Ph | | Email address | | | |
| Instru | ctions for Petitioner | | | | |
| (H-401) | Filing your Notice electronically | | | | |
| | EDMS will automatically serve Responding requirements. | ondent unless F | Respondent is exempt from e | lectronic | |
| | Filing your Notice in paper (if yo | ou have receive | d permission from the court | to file in pa | aper) |
| | Deliver a copy of this form to Resp Complete form 125 and file the ori File the original of this form (126) Keep a copy for your records. | iginal at the cle | rk of court's office. | | |
| Novemb | 2042 | Dula 17 100 | Farma 420 | | Dogo 1 of 1 |

Rule 17.100—Form 127: Request for Relief in a Dissolution of Marriage with no Minor or Dependent Adult Children

Caution: This form may require you to provide protected or sensitive information.

Use this form only if you have filed a Petition for Dissolution of Marriage (101) and:

- Your spouse (Respondent) did not file an Answer, or
- Your spouse will not work with you to prepare a Settlement Agreement (128).
 - If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (111) if you have not already done so.
 - ffiling in paper, you may use form 111 to provide any protected information in full if you have not already done so.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| n the Iowa District Court for | County where your ca | se is filed | Count |
|--|---|--|----------|
| Upon the Petition of | Equity case no |) | |
| Petitioner Full name: first, middle, last | of Marri | r Relief in a age with no dent Adult (| |
| and concerning | | | |
| Respondent Full name: first, middle, last | _ | | |
| Personal Information Fill in all information and you fear for your safety, you may leave your | | | |
| I am Check one A. Petitioner B. Respondent (1) Petitioner's birth year and preser | nt residence: Birth year | | |
| Check one A. O Petitioner B. O Respondent | | State | ZIP code |
| Check one A. Petitioner B. Respondent (1) Petitioner's birth year and preser | Birth year | State Email a | |
| Check one A. O Petitioner B. O Respondent (1) Petitioner's birth year and preser Petitioner's present street address | Birth year City Phone number | Email a | |
| Check one A. O Petitioner B. O Respondent (1) Petitioner's birth year and preser Petitioner's present street address County | City _ () Phone number sent residence: | Email a | |

2. Request for Relief

| A. | A. Children Check all that are true | |
|----|--|--|
| | (1) There are no children under the age of 18 who are ch | nildren of both Petitioner and Respondent. |
| | (2) There are no children under the age of 18 who were | adopted or born during this marriage. |
| | (3) There are no children 18 years of age or older wh | o still need support. |
| | (4) Neither Petitioner nor Respondent is pregnant. | |
| В. | 3. Breakdown of marriage | |
| | The marriage is broken down and cannot be saved. | |
| C. | C. Counseling | |
| | Counseling will not save the marriage. | |
| D. | D. Waiting period before decree Check one | |
| | (1) More than 90 days have passed since Responde | nt was served with an Original Notice. |
| | (2) Fewer than 90 days have passed since Responde but I want the court to take action right away with children affected by this action. Neither Petitione This paper explains how I would like to settle all is | out a separate hearing. There are no rnor Respondent is pregnant. |
| E. | E. Financial affidavits Check one | |
| | I filed a Financial Affidavit (124). I certify that I ha identity and value of all assets and debts. | ve fully disclosed all income and the |
| | (2) O I am asking that the court not require me to file a | Financial Affidavit. Explain |
| F. | F. Division of personal property Check one | |
| | (1) All of the personal property obtained during the m Petitioner will keep the personal property in Petitic keep the personal property in Respondent's poss | oner's possession, and Respondent will |
| | (2) O I ask that our personal property be divided as follows: | ows: Attach additional sheets if necessary. |
| | a. Petitioner will get the following as Petitioner's sep | arate personal property: |
| | | |
| | | |
| | | |
| | b. Respondent will get the following as Respondent | s separate personal property: |
| | | |
| | | |
| | | |

| G. | G. Division of real estate | | | | | | | | |
|----|----------------------------|--|--|---|-------|--|--|--|--|
| | | For each parcel of real estate you own, provide the following information. | | | | | | | |
| | Atta | ch a sep | arate sheet for each additional parc | cel. | | | | | |
| | (1) | Owners | ship of real estate | | | | | | |
| | | Check o | ne | | | | | | |
| | | a. 🔘 | We do not own any real estate. | If you check a, skip to H. | | | | | |
| | | b. () | We own real estate located at: | | , | | | | |
| | | _ | | Street address | | | | | |
| | | | in the City of | , County of | , and | | | | |
| | | | State of | This land is described in the deed as follows: | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | (2) | The re | al estate shall be: | | | | | | |
| | ` ' | Check o | | | | | | | |
| | | a. (| Sold and the profit or debt divid | led% to Petitioner and% | | | | | |
| | | • | to Respondent. | | | | | | |
| | | b. 🔘 | Awarded to Petitioner, subject t | to all liens and mortgages. | | | | | |
| | | c. $igcup$ | Awarded to Respondent, subject | ct to all liens and mortgages. | | | | | |
| | | d. \bigcirc | Other Explain | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | (3) | Additio | onal real estate | | | | | | |
| | | ☐ Che | eck this box if you are attaching sep | arate sheets for additional parcels of real estate. | | | | | |
| Н. | Divi | ision of | f debts | | | | | | |
| | Che | ck one | | | | | | | |
| | (1) (| O Th | ere are no debts. | | | | | | |
| | (2) | | ave listed all the debts I know ab ach additional sheets if necessary. | out and ask that they be divided as follows: | | | | | |
| | | | titioner will pay the following deb | ts: | | | | | |

| i. Business or person to whom a debt is owed | ii. Account number, if any Last 4 numbers only | iii. Total amount still owed |
|--|--|------------------------------|
| (a) | | \$ |
| (b) | | \$ |

| | | (c) | | | | | \$ |
|----|-------------|---|---|-------------|---------------|---|------------------------------|
| | | (d) | | | | | \$ |
| | | (e) | | | | | \$ |
| | | Petitioner's de | x if you are attaching a sebts. will pay the following | | eet listing a | dditional information | n about |
| | | i. Business o a debt is ov | r person to whom ved | | | int number, if ast 4 numbers only | iii. Total amount still owed |
| | | (a) | | | | | \$ |
| | | (b) | | | | | \$ |
| | | (c) | | | | | \$ |
| | | (d) | | | | | \$ |
| | | (e) | | | | | \$ |
| I. | l as Che | Respondent's c. For any debt sh payment sk that ck one Neither Petit | we do not know about tioner nor Responder | it, the spo | use who m | nade the debt will post the other. to equalize the o | pay that debt. |
| J. | (3) (| Respondent and debts by | Month | | , 20 | | livision of property |
| | Che I as | ck one k that: Neither Petil | tioner nor Responder oport (alimony) be pai | | | | |

3.

| K. | Name change Check one | | | | |
|----------|---|---|--|--|--|
| | I ask that my last name | | | | |
| | • | | | | |
| | | Norman and the standard to | | | |
| | (2) Be changed to: Print your former or birth name | Name can only be changed to name on birth certificate or name used immediately prior to the marriage. | | | |
| L. | Court fees | process and manager | | | |
| | Check one | | | | |
| | I ask that | | | | |
| | (1) Petitioner will pay all court fees. | | | | |
| | (2) Respondent will pay all court fees. | | | | |
| | (3) Petitioner and Respondent shall each pay one-half of | the remaining court fees. | | | |
| | (4) Petitioner and Respondent shall each pay one-half of the total court fees. | | | | |
| М. | Attorney's fees | | | | |
| | Check one | | | | |
| | (1) I have no attorney's fees. | | | | |
| | (2) I will pay my own attorney's fees. | | | | |
| | (3) I ask that my spouse pay me \$ for a | ttorney's fees. | | | |
| N. | Necessary documents | | | | |
| | I ask that the court require each of us to sign and deliver to ea needed to carry out the terms of the Decree. | ch other any papers that may be | | | |
| Ο. | Other request for relief Attach additional sheets if necessary | | | | |
| | | | | | |
| Sta | atements of understanding and fact | | | | |
| Che | eck all that apply | | | | |
| A. | ☐ I have made a full disclosure of my property and deb | ts to the court. | | | |
| В. | ☐ This request for relief addresses all issues in my divo | rce. | | | |
| C. | | | | | |
| . | source approve the requestion feller and | mand it part of the final Boolee. | | | |
| | | | | | |
| | Continued on next page | | | | |

| 4. | . Attorney Help | | | | | | |
|-----|---|---|--|---------------------|--------------------|--|--|
| | Check one | | | | | | |
| | A. O An attorney did not help me prepare or fill in this paper. | | | | | | |
| | B. An attorney helped me prepare or fill in this paper. If you check B, you must fill in the following information: | | | | | | |
| | Name of attorney or organization | , if any | Attorney's P.I.N. | # – Ask the attorne | y | | |
| | | | | | | | |
| | Business address of attorney or o | rganization | City | State | ZIP code | | |
| | () Attorney's phone number | () Attorney's fax | c number – optional | Attorney's email | address – optional | | |
| 5. | Section 5 to be completed only if filing in | Certification of Service by Mailing or Delivery Section 5 to be completed only if filing in paper or if the other party is exempt from electronic filing. | | | | | |
| | This document, if filed electronically will o | nutomatically | be served on registe | red parties. | | | |
| | I, | , certi | fy that on <i>Month</i> | | , 20 | | |
| | Print your name I mailed or gave a copy of this Req | | | | | | |
| | Name of person to whom I delivered or ma | riled it City | | State | ZIP code | | |
| 6. | . Oath and Signature | | | | | | |
| | I, | . have | read this Reque | est. and I certify | under penalty | | |
| | I,, have read this Request, and I certify under penalty | | | | | | |
| | of perjury and pursuant to the laws in this Request is true and correct. | | e of lowa that the $\frac{1}{Your\ signature}$ | information I ha | ave provided | | |
| | Signed on: Month Day | Year | Your signature* | | | | |
| | Mailing address | | ty | State | ZIP code | | |
| | () | | | | | | |
| | Phone number Email ac | ldress | Add | itional email addre | ss, if applicable | | |
| | * Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically. | | | | | | |
| | | | | | | | |
| Nov | ovember 2013 | Rule 17.100 | —Form 127 | | Page 6 of 6 | | |

Rule 17.100—Form 128 Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children

Caution: This form may require you to provide protected or confidential information.

Use this form only if you and your spouse both agree to the terms of a settlement agreement.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (111) if you have not already done so.
- If filing in paper, you may use form 111 to provide any protected information in full.

Do not use this form if:

- You and your spouse have children under the age of 18, or
- You and your spouse have children 18 years of age or older who still need support.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the | lowa District Court for | County where your | case is filed | County |
|--------|--|--|---|----------------------|
| Upoi | n the Petition of | Equity case | e no | |
| Petit | ioner Full name: first, middle, last | Dissolu | Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Childre | |
| and c | concerning | Willion of | Dependent Ac | |
| Resp | pondent Full name: first, middle, last | | | |
| | ersonal Information Fill in all in | | | ulted by your spouse |
| and | rsonal Information Fill in all in | your address, phone numbe | er, and email blank. | ulted by your spouse |
| and | ersonal Information Fill in all in al | your address, phone numbent residence: Birth year | r, and email blank. | ZIP code |
| A. | ersonal Information Fill in all in al | your address, phone number nt residence: Birth year City Phone number | er, and email blank. State Email a | ZIP code |
| A. | ersonal Information Fill in all in all in all you fear for your safety, you may leave Petitioner's birth year and prese Petitioner's present street address County | your address, phone number nt residence: Birth year City Phone number sent residence: | er, and email blank. State Email a | ZIP code |

2. Agreements

April 2014

| We | e agree to the following: | | | | |
|----|--|--|--|--|--|
| A. | . Children Check all that are true | | | | |
| | (1) \square There are no children under the age of 18 who are children of both Petitioner and Respondent. | | | | |
| | (2) There are no children under the age of 18 who were adopted or born during this marriage. | | | | |
| | (3) There are no children 18 years of age or older who still need support. | | | | |
| | (4) Neither Petitioner nor Respondent is pregnant. | | | | |
| B. | Breakdown of marriage | | | | |
| | The marriage is broken down and cannot be saved. | | | | |
| C. | Counseling | | | | |
| _ | Counseling will not save the marriage. | | | | |
| D. | Waiting period before decree Check one | | | | |
| | (1) More than 90 days have passed since Respondent was served with an Original Notice. | | | | |
| | (2) Fewer than 90 days have passed since Respondent was served with an Original Notice, but we want the court to take action right away without a separate hearing. We have no children affected by this action. Neither Petitioner nor Respondent is pregnant. This paper explains how we would like to settle all issues in our divorce. | | | | |
| E. | Financial affidavits Check one | | | | |
| | (1) Petitioner or Respondent has filed a Financial Affidavit (124). | | | | |
| | If you check (1), check a and/or b. | | | | |
| | a. Petitioner has filed a Financial Affidavit. Petitioner certifies that Petitioner | | | | |
| | has fully disclosed all income and the identity and value of all assets and debts. b. Respondent has filed a Financial Affidavit. Respondent certifies that Respondent | | | | |
| | has fully disclosed all income and the identity and value of all assets and debts. | | | | |
| | (2) We are asking that the court not require us to file Financial Affidavits because: Explain | | | | |
| | | | | | |
| F. | Division of personal property Check one | | | | |
| | (1) We have divided our personal property. Petitioner will keep the personal property in Petitioner's possession. Respondent will keep the personal property in Respondent's possession. | | | | |
| | If you check (1), skip to G. | | | | |
| | (2) Our personal property will be divided as follows: Attach additional sheets if necessary. | | | | |
| | a. Petitioner will get the following as Petitioner's separate personal property: | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| 17.1 | b. | b. Respondent will get the following as Respondent's separate personal property: | | | | | | |
|------|---|--|--|--------|--|--|--|--|
| | | | | | | | | |
| G. | Divisio | sion of real estate | | | | | | |
| | For each parcel of real estate you own, provide the following information. Attach a separate sheet for each additional parcel. | | | | | | | |
| | (1) Ownership of real estate Check one | | | | | | | |
| | a. | We do not own any real estate | | | | | | |
| | b. | o. We own real estate located at: Street address | | | | | | |
| | | in the City of | , County of | , and | | | | |
| | | | . This land is described in the deed as follows: | - | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | (2) The real estate shall be: Check one | | | | | | | |
| | a. | Sold and the profit or debt divito Respondent. | ded% to Petitioner and% | | | | | |
| | b. | Awarded to Petitioner, subject | to all liens and mortgages. | | | | | |
| | C. | Awarded to Respondent, subject to all liens and mortgages. | ect to all liens and mortgages. | | | | | |
| | d. | Other Explain | | | | | | |
| | (3) Add | ditional real estate | | | | | | |
| | | | parate sheets for additional parcels of real estate. | | | | | |
| Н. | Divisio | n of debts | | | | | | |
| | Check o | ne | | | | | | |
| | (1) O | There are no debts. | | | | | | |
| | (2) 🔾 | We have listed all the debts that w Attach additional sheets if necessary. | e know about and ask that they be divided as fo | llows: | | | | |
| | | G | 1 | | | | | |

Rule 17.100—Form 128: Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

a. Petitioner will pay the following debts:

| i. Business or person to whom a debt is owed | ii. Account number, if any Last 4 numbers only | iii. Total amount still owed |
|--|--|------------------------------|
| (a) | | \$ |
| (b) | | \$ |
| (c) | | \$ |
| (d) | | \$ |
| (e) | | \$ |

Check this box if you are attaching a separate sheet listing additional information about Petitioner's debts.

b. Respondent will pay the following debts:

| i. Business or person to whom a debt is owed | ii. Account number, if any Last 4 numbers only | iii. Total amount still owed |
|--|--|---------------------------------|
| (a) | | \$ |
| (b) | | \$ |
| (c) | | \$ |
| (d) | | \$ |
| (e) | | \$ |

Check this box if you are attaching a separate sheet listing additional information about Respondent's debts.

c. For any debt we do not know about, the spouse who made the debt will pay that debt.

I. Cash payment

| W | e as | k t | hat |
|---|------|-----|-----|
| | | | |

Check one

| (1) Neitner Petitioner nor Responde | ent pay any money to the other. |
|---|--------------------------------------|
| (2) Petitioner pay Respondent \$ and debts by | to equalize the division of property |
| Month | , 20 |

| (3) Respondent pay Petitioner \$ _ and debts by | | to equa | alize the division of property |
|---|-------|---------------|--------------------------------|
| Month | — Dav | , 20 <u> </u> | |

Rule~17.100 - Form~128: Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued the property of the prope

| J. | Spousal support (alimony) | | | | | | | | | |
|----|--|--|--|--|--|--|--|--|--|--|
| | Check one We ask that: | | | | | | | | | |
| | (1) Neither Petitioner nor Respondent pay sp | ousal support (alimony) to the other | | | | | | | | |
| | (2) Petitioner pay spousal support (alimony) to Respondent as follows: | | | | | | | | | |
| | (2) O i emioner pay opododi oupport (diimony) t | o recoportacità do followo. | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | (3) Respondent pay spousal support (alimony | /) to Petitioner as follows: | | | | | | | | |
| | | | | | | | | | | |
| ., | | | | | | | | | | |
| K. | Name change Check one | | | | | | | | | |
| | We ask that | | | | | | | | | |
| | (1) Petitioner's name | | | | | | | | | |
| | a. Not be changed. | | | | | | | | | |
| | b. Be changed to: | Name can only be changed to | | | | | | | | |
| | b. O be changed to. | name on birth certificate or name used | | | | | | | | |
| | Print Petitioner's former or birth name | _ immediately prior to the marriage. | | | | | | | | |
| | (2) Respondent's name | | | | | | | | | |
| | a. O Not be changed. | | | | | | | | | |
| | b. Be changed to: | Name can only be changed to name on birth certificate or name used | | | | | | | | |
| | Print Respondent's former or birth name | _ immediately prior to the marriage. | | | | | | | | |
| L. | Court fees | | | | | | | | | |
| | Check one | | | | | | | | | |
| | We ask that | | | | | | | | | |
| | (1) Petitioner will pay all court fees. | | | | | | | | | |
| | (2) Respondent will pay all court fees. | | | | | | | | | |
| | (3) Petitioner and Respondent shall each pay | one-half of the remaining court fees. | | | | | | | | |
| | (4) Petitioner and Respondent shall each pay | one-half of the total court fees. | | | | | | | | |
| | | | | | | | | | | |

Rule 17.100—Form 128: Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

| M. | Attorney's fees | |
|----|---|--|
| | (1) Petitioner's attorney's fees | |
| | Check one | |
| | a. O Petitioner has no attorney's fees. | |
| | b. O Petitioner will pay Petitioner's attorney's fees | S. |
| | c. Respondent will pay \$ | for Petitioner's attorney's fees. |
| | (2) Respondent's attorney's fees | |
| | Check one | |
| | a. Respondent has no attorney's fees. | |
| | b. Respondent will pay Respondent's attorney's | s fees. |
| | c. Petitioner will pay \$ | for Respondent's attorney's fees. |
| N. | Necessary documents | |
| | We will sign and promptly deliver to each other any paper Settlement Agreement. | ers that may be needed to carry out this |
| Ο. | Other agreements | |
| | Attach additional sheets if necessary. | |

4.

 $Rule\ 17.100 — Form\ 128: \textit{Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children}, continued a property of the prope$

| 3. | | torney Help eck one | | | | | | | | |
|--|-----|--|--|-----------------------|----------------------|-----------------------|--|--|--|--|
| | | Petitioner | | | | | | | | |
| | | (1) An attorney did no | t help me prepare or | fill in this paper. | | | | | | |
| (2) An attorney helped me prepare or fill in this paper. | | | | | | | | | | |
| | | If you check (2), you | | | | | | | | |
| | | Name of attorney or orgo | anization, if any | Attorney's P.I.N. | #-Ask the attorn | пеу | | | | |
| | | Business address of attor | rney or organization | City | State | ZIP code | | | | |
| | | () | (). | | | | | | | |
| | R | Attorney's phone number Respondent | r () . Attorney's fac | x number – optional | Attorney's ema | il address – optional | | | | |
| | Ο. | _ | t bala ma prapara ai | r fill in this paper | | | | | | |
| | | × × | t help me prepare or | | | | | | | |
| | | | d me prepare or fill ir I must fill in the follow | | | | | | | |
| | | Name of attorney or orgo | anization, if any | Attorney's P.I.N. | #-Ask the attorn | пеу | | | | |
| | | Business address of attor | rney or organization | City | State | ZIP code | | | | |
| | | () | | | | | | | | |
| | | Attorney's phone number | r Attorney's fa | x number – optional | Attorney's ema | il address – optional | | | | |
| 4. | Oá | aths and Signatures | | | | | | | | |
| | pro | is Settlement Agreement addi operty and debts to each othe | | | | | | | | |
| | | al Decree. | | | | | | | | |
| | Α. | Petitioner's Oath and Sign | | | | | | | | |
| | | Print your name | , certify | y under penalty of pe | erjury and pursuar | t to the | | | | |
| | | laws of the State of Iowa that | I have read this Settle | ment Agreement and | d it accurately stat | es how I would | | | | |
| | | like the court to address the is | | | | | | | | |
| | | Agreement. I am voluntarily s presented to a judge for appro | | _ | is Settlement Agre | ement be | | | | |
| | | | 20 | | | | | | | |
| | | Month Day | Year Year | Petitioner's signa | ture* | | | | | |
| | | | | | | | | | | |
| | | Mailing address | City | , | State | ZIP code | | | | |
| | | () | | | 11 1 .1 | 7.7 | | | | |
| | | Phone number | Email address | | dditional email ac | _ | | | | |
| | | * Whether filing electronically of electronically, scan the form of | | | on this form. If you | ı are filing | | | | |
| | | Liver of the day, bout no form o | | d on next page | | | | | | |
| | | | Commuet | ı он нем риде | | | | | | |

Rule 17.100—Form 128: Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

| Respondent' | s Oath and Signa | ature | | | | |
|---|--|---------------|----------------|--------------------|-------------|-----------------------|
| l, Print your na | me | , cert | ify under pena | alty of perjury an | d pursuar | nt to the |
| laws of the State of Iowa that I have read this Settlement Agreement and it accurately states how I w like the court to address the issues in my divorce. I know I have the right to talk to an attorney about Agreement. I am voluntarily signing this Agreement. I am asking that this Settlement Agreement be presented to a judge for approval and filing with the court. | | | | | | orney about this |
| Month | Day | , 20 | Responde | ent's signature* | | |
| Mailing addre | ess | Ci | ty | | State | ZIP code |
| () _ Phone number | y- | Email address | | Additiona | l email ac | ddress – if available |
| | g electronically or in v, scan the form after | | | | orm. If you | u are filing |

Rules 17.101 to **17.199** Reserved.

Rule 17.200 Family law forms for dissolution of marriage with dependent children. The following forms are for use in dissolution of marriage (divorce) actions with children under the age of 18 who are children of both spouses to the marriage, or children under the age of 18 who were adopted or born during the marriage, or children 18 years of age or older who are children of both spouses to the marriage and are dependent or still need support. These forms must also be used if a spouse of the marriage is pregnant.

Form 201: Petition for Dissolution of Marriage with Children

Form 202: Petition Cover Sheet for a Dissolution of Marriage with Children

Form 203: Confidential Information Form

Form 204: Original Notice for Personal Service
Form 204a: Original Notice for Personal Service

Form 205: Acceptance of Service

Form 206: Directions for Service of Original Notice
Form 207: Motion and Affidavit to Serve by Publication

Form 208: Original Notice by Publication

Form 209: Application and Affidavit to Defer Payment of Costs

Form 210: Affidavit of Service of Original Notice and Petition for Dissolution of

Marriage

Form 211: Protected Information Disclosure
Form 212: Joint Statement on Legal Parent
Form 213: Motion to Disestablish Legal Parent

Form 214: Reserved

Form 215: Answer to Petition for Dissolution of Marriage with Children

Form 216: General Answer to a Petition for Dissolution of Marriage with Children

Forms 217 to 220: Reserved

Form 221: Affidavit for Temporary Custody and Visitation
Form 222: Motion in a Dissolution of Marriage with Children

Form 223: Response to a Motion

Form 224: Financial Affidavit for a Dissolution of Marriage with Children

Form 225: Affidavit of Mailing Notice

Form 226: Notice of Intent to File Written Application for Default Decree
Form 227: Request for Relief in a Dissolution of Marriage with Children
Form 228: Settlement Agreement for a Dissolution of Marriage with Children

Form 229: Agreed Parenting Plan
Form 230: Proposed Parenting Plan

Forms 231 to 300: Reserved

[Court Order December 19, 2013; March 26, 2014]

Rule 17.200—Form 201: Petition for Dissolution of Marriage with Children

Read the Guide to Representing Yourself in an Iowa Divorce Case with Children on the Iowa Judicial Branch website before using this form.

Petitioner: Use this form only if your spouse lives in Iowa or you have lived in Iowa for the last year before you file the Petition, and one or more of the following are true:

- There are children under age 18 who are children of both Petitioner and Respondent.
- There are children under age 18 who were born or adopted during this marriage.
- There are children over age 18 who still need support.
- · A spouse is pregnant.

Do not use this form if all of these are true (instead, use form 201):

- · You and your spouse do not have children under age 18.
- . You and your spouse do not have children age 18 or over who still need support.
- · A spouse is not pregnant.
- If filing electronically, you must provide any protected information in full on form 211.
- If filing in paper, you may use form 211 to provide any protected information in full.

| In the Iowa District Court | | 1 01 | · d. D | County |
|---|----------------|---------------------------------|---|-------------------|
| n Re the Marriage of: | County | where you are fil | ng this Petition | |
| Your current legal name | | Your spouse 's c | urrent legal name | |
| Upon the Petition of | | | | |
| | - | For clerk's use only | | |
| Petitioner Full name: first, middle, last The spouse who files the Petition | Petition | for Dissolutior with Childre | | |
| | | | | |
| and concerning | | | | |
| Respondent Full name: first, middle, last the other spouse | Tinformation | that you brown If | | uitad by your spo |
| Respondent Full name: first, middle, last he other spouse | | | ou have been assa | |
| Respondent Full name: first, middle, last the other spouse 1. Personal Information Fill in all | ave your stree | t address, phone n | ou have been assa | |
| Respondent Full name: first, middle, last the other spouse I. Personal Information Fill in all and you fear for your safety, you may le | ave your stree | t address, phone n | ou have been assa umber, and email b | |

Rule 17.200—Form 201: Petition for Dissolution of Marriage with Children, continued

| В. | | | | | Diatlana | O111 |
|----|---|--|--|--|---|--|
| | | | | | Birth ye | ur |
| | Respondent's present stree | t address | City | | State | ZIP code |
| | ~ | | () | | | 11 |
| | County | | Phone number | | Email ad | daress |
| C. | Other person, if any, we Fill in as much information | | ation or custod | y rights of the | parties' o | children: |
| | Full name: first, middle, la | st | | | | |
| | Present street address | | City | | State | ZIP code |
| | | | () | | | |
| | County | | Phone number | | Email a | ddress |
| Ge | eneral Information A | bout the M | arriage and | the Parties | | |
| | Date and location of th | | arriage and | ine i uities | | |
| Λ. | Date and location of the | ie mamage | | | | |
| | Month Do | , _ | | | | tate |
| | Monin Di | ay Year | City | | ~. | iaic |
| R | | ay Year | City | | 2. | iuie |
| B. | Children Check all that are true | ay Year | City | | 2. | uie |
| B. | Children Check all that are true | | ŕ | en of both Petitio | | |
| B. | Children Check all that are true (1) ☐ There are childre | n under age 1 | 8 who are childre | | oner and R | espondent. |
| B. | Children Check all that are true (1) | n under age 1 en under age | e who are childre 18 who were ad | opted or born o | oner and R during this | espondent. marriage. |
| B. | Children Check all that are true (1) There are childre (2) There are childre This includes any a parent. | n under age 1 en under age child born to a | 8 who are childre 18 who were ad spouse during the | opted or born o e marriage, but j | oner and R during this | espondent. marriage. |
| В. | Children Check all that are true (1) | n under age 1 en under age <i>child born to a</i> en 18 years o | 8 who are childre 18 who were ad spouse during the r older who still i | opted or born o e marriage, but j | oner and R during this | espondent. marriage. |
| | Children Check all that are true (1) There are childre (2) There are childre This includes any a parent. (3) There are childre (4) Petitioner or Res | n under age 1 en under age <i>child born to a</i> en 18 years o spondent is pi | 8 who are childre 18 who were ad spouse during the r older who still i | opted or born o e marriage, but j | oner and R during this | espondent. marriage. |
| | Children Check all that are true (1) There are childre (2) There are childre This includes any a parent. (3) There are childre (4) Petitioner or Res Identification of childre | n under age 1 en under age <i>child born to a</i> en 18 years o spondent is pi | 8 who are childre 18 who were ad spouse during the r older who still i | opted or born on the properties of the propertie | oner and R during this for whom th | espondent. marriage. |
| | Children Check all that are true (1) There are childre (2) There are childre This includes any a parent. (3) There are childre (4) Petitioner or Res | n under age 1 en under age <i>child born to a</i> en 18 years o spondent is pi | 8 who are childred to the second to the seco | opted or born o e marriage, but j | oner and R during this for whom th | espondent. marriage. ne other spouse t |
| | Children Check all that are true (1) There are childre (2) There are childre This includes any a parent. (3) There are childre (4) Petitioner or Res Identification of childre First, middle, & last | n under age 1 en under age child born to a en 18 years o spondent is pr | 8 who are childred to the second to the seco | opted or born of the marriage, but in the marriage of the marr | oner and R during this for whom th | espondent. marriage. |
| | Children Check all that are true (1) There are childre (2) There are childre This includes any a parent. (3) There are childre (4) Petitioner or Res Identification of childre First, middle, & last initials of each child | n under age 1 en under age child born to a en 18 years o spondent is pr | 8 who are childred to the second to the seco | opted or born of emarriage, but interest, middle, initials of each | oner and R during this for whom th | espondent. marriage. ne other spouse t |
| | Children Check all that are true (1) There are childre (2) There are childre This includes any a parent. (3) There are childre (4) Petitioner or Res Identification of childre First, middle, & last initials of each child (1) | n under age 1 en under age child born to a en 18 years o spondent is pr | 8 who are childred to the second to the seco | opted or born of emarriage, but interest, middle, initials of each | oner and R during this for whom th | espondent. marriage. ne other spouse t |
| | Children Check all that are true (1) There are childre (2) There are childre This includes any a parent. (3) There are childre (4) Petitioner or Res Identification of childre First, middle, & last initials of each child (1) (2) | n under age 1 en under age child born to a en 18 years o spondent is pr en Birth yea | 8 who are childre 18 who were ad spouse during the r older who still the | popted or born of marriage, but in meed support. First, middle, initials of each (4) (5) (6) | oner and R during this for whom th | espondent. marriage. ne other spouse t |
| C. | Children Check all that are true (1) There are childre (2) There are childre This includes any a parent. (3) Petitioner or Res Identification of childre First, middle, & last initials of each child (1) (2) (3) | n under age 1 en under age child born to a en 18 years o spondent is pr n Birth yea | 8 who are childre 18 who were ad spouse during the r older who still the | popted or born of marriage, but in meed support. First, middle, initials of each (4) (5) (6) | oner and R during this for whom th | espondent. marriage. ne other spouse t |
| C. | Children Check all that are true (1) There are childre (2) There are childre This includes any a parent. (3) Petitioner or Res Identification of childre First, middle, & last initials of each child (1) (2) (3) Check this box if you here | n under age 1 en under age child born to a en 18 years o spondent is pr en Birth year ave attached a gements en have lived o | 8 who are childred to the spouse during the spouse during the regnant. | opted or born of marriage, but in meed support. First, middle, initials of each (4) (5) (6) sting additional of the present | oner and R during this for whom the A last children. | espondent. marriage. ne other spouse i |
| C. | Children Check all that are true (1) There are childred This includes any a parent. (3) Petitioner or Residentification of childred First, middle, & last initials of each child (1) (2) (3) Check this box if you here childred support of the childred support of the childred support of the childred support of the children's living arrange places where the children support of the | n under age 1 en under age child born to a en 18 years o spondent is pr en Birth year ave attached a gements en have lived o | 8 who are childred to the spouse during the spouse during the regnant. | opted or born of marriage, but in meed support. First, middle, initials of each (4) (5) (6) sting additional of the present | oner and R during this for whom the A last children. | espondent. marriage. ne other spouse i |

Rule 17.200-Form 201: Petition for Dissolution of Marriage with Children, continued Lived with Adult name State City (2) Children: Initials Initials Initials Initials Initials Lived with Adult name mm уууу State (3) Children: Initials Initials Initials Initials Initials Lived with Adult name State City (4) Children: Initials Initials Initials Initials Initials Lived with Adult name mmCity State (5) Children: <u>Initials</u> Initials Initials Initials Initials Lived with from Adult name dd mm mmyyyy State ☐ Check this box if you have attached a separate sheet listing additional children. If the children have been in Iowa for less than six months, you may be able to get a divorce, but you might not be able to get custody. The rules are complicated and you may need to talk to an attorney. E. Petitioner's residence You cannot get a divorce in Iowa if your spouse does not live in Iowa and you have lived in Iowa for less than one year, or if you came to live in Iowa just to get a divorce. If you do not live in Iowa, you can only get a divorce in Iowa if your spouse lives in Iowa. If you have questions about this, talk to an attorney. (1) The only reason that Petitioner (you are Petitioner) is living in Iowa is just to get a divorce. True If you do not live in Iowa, or if you live in Iowa for reasons other than just to get a divorce, check "False."

| Rule | e 17.2 | 00—Form | 201: . | Petition for | Dissolutio | n of Mar | riage with | Children, | continued | | | | |
|------|--------|---------------|--------|-------------------------|------------|----------|------------|-------------------|-----------------|---------------------------|--------------------------------|--------------|---------------|
| | | (2) Pe | titior | ner has I | ived in I | lowa fo | r the la | st | year | s and | mon | ths | |
| | | in _ | | | | | cou | unty. | | | | | |
| | | | - | | - | | | | - | our birth. e since you | ı last moved | to Iowa. | |
| | F. | Parties | s' re | sidence |) | | | | | | | | |
| | | divorce | in Io | | | n Iowa, | you mu | st have l | ived in Io | owa for th | e last year b | before your | may obtain a |
| | | | | | | | , | | | | | | |
| | | . , | | titioner h | | | | | • | | | | |
| | | (2) 📙 | Re | sponder | it (your | spouse | e) is a r | esident | of Iowa. | | | | |
| | G. | Condit | ion | of the r | narriag | е | | | | | | | |
| | | Check a | ill th | at are tri | ie . | | | | | | | | |
| | | (1) | Th | e marria | ge is br | oken a | nd canı | not be s | aved. | | | | |
| | | (2) | | | - | | _ | _ | _ | this marr o talk to d | iage. an attorney. | | |
| | | (3) | Th | is Petitic | n is bei | ng filed | d in goo | d faith f | or the p | urpose of | f ending th | e marriage | e. |
| | | (4) | Со | unseling | will not | save th | ne marri | iage. <i>If a</i> | counselin | g may save | e the marria | ge, do not c | :heck (4). |
| | Н. | • | | ent's sta that is tr | | | | | | | | | |
| | | (1) | Re | sponder | nt (your | spouse | e) is in t | the milita | ary serv | ice. | | | |
| | | | | ou check ouse is in | | | | | | | case from g | oing forwa | ırd if your |
| | | (2) | Re | sponder | nt is in p | rison c | or jail at | | | | | | in |
| | | | | | | | - | Name of | facility | | | | State |
| | I. | Check of | | or no c | ontact | order | | | | | | | |
| | | (1) 🔿 | | ere is ne sponder | | | | der" nor | a "no co | ntact orc | der" betwee | n Petition | ner (you) and |
| | | (2) 🔾 | | ere is a vou check | | | | | | ler" betwe | een Petitio | ner and R | espondent. |
| | | | a. | County | and stat | e where | the ord | ler came | | | | | |
| | | | | | | | | | Co | ounty | | | State |
| | | | b. | | ase num | | | | | - | | | |
| 3. | | her Ca | | s Abou | t the | Child | ren | | | | | | |
| | A. | \bigcirc Th | ere | are no | other c | ases a | about t | he child | dren. <i>If</i> | you check | k A, skip to | 4. | |
| | B. | \sim | | are oth | | | | | | | | | |
| | | | | | | | | | | | nay not be al ed to talk to | | |

Rule 17.200-Form 201: Petition for Dissolution of Marriage with Children, continued If you check B, fill in the applicable information below. (1) Juvenile court Check a or b. There is no juvenile court case. There is a juvenile court case. If you check b, fill in the following information: County and state of the juvenile court case: County State Juvenile court case number: Check one Concurrent jurisdiction has been granted. Concurrent jurisdiction has not been granted. If the juvenile court has not given concurrent jurisdiction (permission), then child custody cannot be decided in this case. You should talk to an attorney. (2) Custody order You might not be able to get custody in Iowa if there is a custody order entered in another state. Check a or b. There is no custody order. There is a custody order. If you check b, fill in the following information: County and state where the custody order came from: County State ii. Court case number: (3) Child support order Check a or b. There is no child support order. There is a child support order. If you check b, fill in the following information: County and state where the child support order came from: County State Court case number: **4.** Other Information All of the basic information you need to tell the court is listed on this form. Provide other information only if you need to explain something. 5. Petitioner's Request A. Petitioner asks the court to: Check all that apply. The court will only consider items that are checked. (1) End the marriage of Petitioner (you) and Respondent (your spouse)

Rule 17.200—Form 201: Petition for Dissolution of Marriage with Children, continued

| (2) | Decide custody and visitation. | | | | | |
|------|--|--|--|--|--|--|
| (3) | Order child support and medical support | Order child support and medical support. | | | | |
| (4) | Order payment of school or college tuiti | on. | | | | |
| (5) | Fairly divide the property and the debts | of the parties. | | | | |
| (6) | Order that Respondent pay the court fees. | | | | | |
| (7) | Order that Respondent pay for Petitioner's attorney's fees before the divorce is final. If you check (7), you must file form 222. | | | | | |
| (8) | Order that Respondent pay spousal sup If you check (8), you must file form 222. | pport (alimony) to Petitioner. | | | | |
| (9) | ☐ Change Petitioner's last name to: Name can only be changed to name on birth certificate or name used immediately prior to the marriage. | | | | | |
| | Print your former or birth name | | | | | |
| (10) | Order counseling to save the marriage. | | | | | |
| (11) | Other request: | | | | | |

6. Attorney Help

Rule 17.200—Form 201: Petition for Dissolution of Marriage with Children, continued

| | Check one | | en | | |
|----|---|--|-----------------------------|---|-----------------------------|
| | A. An attorney did not B. An attorney helped If you check B, you mu. | me prepare or fi | ll in this paper. | | |
| | Name of attorney or or | ganization, if any | Attorney's P.I.N. | # $ Ask$ the attorne | y |
| | Business address of atte | orney or organizatio | on City | State | ZIP code |
| | ()_ Attorney's phone numb | er (| s fax number – optional | Attorney's email | address – optiona |
| 8. | Check one A. O Petitioner will accept B. O Petitioner will accept Oath and Signature I, Print your name of perjury and pursuant to in this Petition is true and other prints. | t service of docur , h the laws of the S | ments in this case at t | the mailing addr | ess below. under penalty |
| | Signed on: Month Da | v , 20 <u>Year</u> | Your signature* | | |
| | 2.0 | , | 2 0 11 21 31 11 11 | | |
| | Mailing address | | City | State | ZIP code |
| | () | | dwrite your signature on th | itional email addre is form. If you are fi | |
| | | | | | |

Important Notice to Petitioner
See next page for instructions for filing a Petition.

Rule 17.200—Form 201: Petition for Dissolution of Marriage with Children

Do not file these instructions

Instructions for Filing a Petition for Dissolution of Marriage with Children

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

Filing your Petition electronically

- If you are filing your divorce case in a county that uses electronic filing, you must register to electronically file. For help with registration, see the eFiler's User Guide How to Register Pro Se (Self Represented) for eFiling on the Iowa Judicial Branch website.
- After you have registered, log in to the electronic filing system to electronically file your dissolution case.
- For help electronically filing your divorce, see <u>How to eFile a New Case</u>.
- With your Petition, you must also file an Original Notice (204) and a Protected Information Disclosure Form (211).
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the efiling of your Petition and other documents.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My Filings, correct the error, and resubmit your filing. For help, see <u>How to Resubmit a Returned Filing</u>.
- Log in to your eFile account and download and print your Petition and Original Notice so that you can serve it on (deliver it to) your spouse.
- For help finding and downloading your Petition and Original Notice, please see My Filings Reference

Filing your Petition in paper

- If the county where you will be filing your Petition does not yet accept electronic filing, you may proceed in paper. If the county does accept electronic filing, you must proceed electronically, unless you have received permission from the court to file in paper.
- With your Petition (201), you must also file a Petition Cover Sheet (202), an Original Notice (204a), and a Confidential Information Form (203).
- Forms 201 and 204a: Make two photocopies if you can deliver copies of these forms to your spouse inperson or by mail. Make three photocopies if you are going to ask the county sheriff or a civil process server to deliver these forms to your spouse.

Note about making photocopies: You should make your photocopies before you go to the courthouse to file your papers. It is expensive to make photocopies at the clerk of court office. It is cheaper to make the copies at a business that makes photocopies or at a public library.

- Forms 202 and 203: You do not have to make photocopies of these forms.
- Take the original forms you filled in and the photocopies to the clerk of court office in your county. Tell the clerk at the counter you are filing a Petition for a divorce.

Instructions for Rule 17.200-Form 201: Petition for Dissolution of Marriage with Children, continued

- Give the clerk at the counter these forms:
 - 201 Petition for Dissolution of Marriage with Children
 - 202 Coversheet for a Petition for Dissolution of Marriage with Children
 - 203 Confidential Information Form (Do not make copies of this form.)
 - 204a Original Notice
- Pay the filing fee. If you cannot afford to pay the filing fee, prepare and file form 209.
- The clerk at the counter can tell you the amount of the filing fee. The Iowa legislature sets these fees and periodically raises them, so check with the clerk's office to confirm the current filing fee.
- The clerk of court will sign the Original Notice (204a). You will have to serve this form on (deliver it to) your spouse.
- The clerk at the counter will time-stamp each of the copies (original and photocopies).

Do not file these instructions

Rule 17.200—Form 202: Petition Cover Sheet for a Dissolution of Marriage with Children

| For court use only Case m | umber | County where case is fil | ed | _ |
|------------------------------|---------------|--------------------------|-------|----------|
| Petitioner | | | | |
| Petitioner's first name | Middle name | Last name | | _ |
| Street address | | City | State | ZIP code |
| () Phone number | Email add | ress | | |
| Case name | | | | |
| Petitioner's first name | Middle name | Last name | | _ |
| VS. | | | | |
| Respondent's first nam | e Middle name | Last name | | _ |

Note to Petitioner

- Petitioner must complete this cover sheet if filing in paper and give it to the clerk of court when filing a Petition for Dissolution of Marriage with Children (201).
- Do not serve this cover sheet on Respondent.
- This cover sheet is for statistical purposes only. It has no legal effect in the case.
- Electronic filers: Do not use this form. The information on this form is automatically generated when you submit your documents electronically.

Rule 17.200—Form 203: Confidential Information Form

This form is to be used by paper filers only.

Each party must complete one of these forms if filing in paper.

lowa Code section 602.6111 requires the parties to a case to provide the clerk of court with certain personal identification information. Each party's completed form will be kept confidential by the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| | In the Iowa District Court for _ | C | ounty where your | case is filed |
|-----------|---|------|------------------|-------------------------|
| Uį | oon the Petition of | | Equity case r | no |
| Pe The | Petitioner Full name: first, middle, last The spouse who files the Petition | | Confid | ential Information Form |
| an | d concerning | | | |
| | espondent Full name: first, middle, last other spouse | | | |
| 1. | Petitioner's Information | | | |
| | Full name: first, middle, last | Birt | // h date | Social Security number |
| 2. | Respondent's Information | | | |
| | Full name: first, middle, last | Birt | // h date | Social Security number |
| 3. | Children's Information | | | |
| | Child 1: | | | |
| | Full name: first, middle, last | Birt | // h date | Social Security number |
| | Child 2: | | | |
| | Full name: first, middle, last | Birt | // h date | Social Security number |
| | Child 3: | | | |
| | Full name: first, middle, last | Birt | // h date | Social Security number |
| | Child 4: | | | |
| | | | / / | |

| Full name: first, middle, last | Birth date | Social Security number |
|--------------------------------|---|------------------------|
| | e attached a separate sheet listing add | |
| Signature of Provider | of Information | |
| Signature of Frovider | Of information | |
| Information provided by: | | |
| | Print your full name: first, middle, la | ast |
| | | , 20 |
| Your signature | Month | Day Year |
| | | |
| | | |
| | | |

Rule 17.200—Form 204: Original Notice for Personal Service

Petitioner must serve the Petition on Respondent within 90 days after filing the Petition.

Failure to meet this deadline may result in the court dismissing the divorce case.

Read the <u>Guide to Representing Yourself in an Iowa Divorce Case with Children</u> on the Iowa Judicial Branch website for additional important instructions. Iowa divorce forms are available free of charge on the <u>Iowa Judical Branch website</u>.

- If filing electronically, Petitioner must complete this form.
- If filing in paper, Petitioner must use form 204a.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the Iowa District Court for | County where Petition is f | County |
|--|-------------------------------------|---------------------|
| Upon the Petition of | Original Notice f | or Personal Service |
| Petitioner Full name: first, middle, last | _ | |
| and concerning | | |
| Respondent Full name: first, middle, last | _ | |
| To Respondent Named Above Petitioner (your spouse) has filed a div A copy of the Petition for Dissolution of Petitioner asks for a divorce. Petitioner's contact information during | of Marriage with Children is attack | 01.1 |
| | | |
| Mailing address City (| St. | ate ZIP code |
| Important instruction | ons for Respondent on next p | page |

Rule 17.200—Form 204: Original Notice for Personal Service, continued

Instructions to Respondent

- A. You must file an Answer or a Motion with the clerk of court in the above county within 20 days after you receive this Original Notice. If you do not file an Answer or Motion within 20 days after receiving this Original Notice, the court may enter a judgment against you giving Petitioner what he or she asked for in the Petition.
- B. For help in your divorce case, and for forms that you must use if you choose to represent yourself without an attorney, visit the Iowa Judicial Branch website at http://www.iowacourts.gov/ and click on "Court Rules & Forms" or on "For the Public."
- C. If you received Petition form 201, you may use Answer form 215.
- D. This case has been filed in a county that uses electronic filing. You must register to eFile through the Iowa Judicial Branch website at https://www.iowacourts.state.ia.us/Efile and obtain a log in and password for filing and viewing documents in your case and for receiving service and notices from the court.
 - For general rules and information on electronic filing, refer to the Iowa Court Rules Chapter 16
 Pertaining to the Use of the Electronic Document Management System, available on the Iowa Judicial
 Branch website.
 - For court rules on the Protection of Personal Privacy in court filings, refer to Division VI of the Iowa Court Rules Chapter 16.
 - If you are unable to proceed electronically, you must receive permission from the court to file in paper.
 Contact the clerk of court in the county where the petition was filed for more information on being excused from electronic filing.
- E. If you electronically file your Answer or Motion, it will be served automatically on Petitioner or on Petitioner's attorney(s). A Notice of Electronic Filing (NEF) will tell you if the court has excused Petitioner from electronic filing. If the court has excused Petitioner from electronic filing, you must mail a copy of your Answer or Motion to Petitioner.

Important Notice to Respondent
You should talk to an attorney at once to protect your interests.

County Courthouse

Rule 17.200—Form 204a: Original Notice for Personal Service

Petitioner: Use this form only if filing in paper. Read the Guide to Representing Yourself in an Iowa Divorce Case with Children for additional important instructions. Iowa divorce forms are available free of charge on the Iowa Judicial Branch website. If filing electronically, Petitioner must use form 204. If filing in paper, Petitioner must use this form. If you do not understand how to use this form, or if you should use this form, talk to an attorney. County In the Iowa District Court for County where Petition is filed **Upon the Petition of** Equity case no. **Original Notice for Personal Service** Petitioner Full name: first, middle, last and concerning Respondent Full name: first, middle, last 1. To Respondent Named Above Petitioner (your spouse) has filed a divorce lawsuit naming you as Respondent. A copy of the Petition for Dissolution of Marriage with Children is attached to this Notice. Petitioner asks for a divorce. Petitioner's contact information during the divorce case: Petitioner's name ZIP code Mailing address City State Email address 2. Instructions to Respondent Named Above You must file an Answer or a Motion with the clerk of court in the above county within 20 days after you receive this Original Notice. If you do not file an Answer or Motion within 20 days after receiving this Original Notice, the court may enter a judgment against you giving Petitioner what he or she asked for in the Petition. If you received Petition form 201, you may use Answer form 215. After you file your Answer or Motion, you must serve a copy of it on Petitioner. (SEAL) Clerk of Court

You should talk to an attorney at once to protect your interests.

City, lowa ZIP code

December 2013 Rule 17.200—Form 204a Page 1 of 1

[Court Order December 19, 2013]

Important Notice to Respondent

Rule 17.200—Form 205: Acceptance of Service

Petitioner must complete this section:

| In the Iowa District Court for | County where Petition is filed | Cou | unty |
|--|--------------------------------|---------------|------------|
| Upon the Petition of | Equity case no | | |
| Petitioner Full name: first, middle, last | Acceptance of | of Servic | e |
| and concerning | | | |
| Respondent Full name: first, middle, last | | | |
| Petitioner must file this form with the clerk of court soon | after Respondent signs it. | | |
| Respondent must complete this section: Respondent's Acceptance of Service, Oa | ith. and Signature | | |
| If Respondent completes this Acceptance of Service, Resp | | 'etitioner so | oon after |
| signing it. Petitioner will file it with the clerk of court. 1, | am Respondent in this case | e. I recei | ved a copy |
| of the Original Notice and the Petition for this call certify under penalty of perjury and pursuant to information I have provided in this Acceptance of | the laws of the State of lov | wa that th | |
| Signed: Month Day, 20_Year | Respondent's signature | | |
| Respondent's mailing address | City | State | ZIP code |
| (| | | |
| Important Notic | e to Respondent | | |

By signing this form, you are not agreeing to what Petitioner wants. You are only agreeing that you received a copy of the Original Notice and Petition.

Rule 17.200—Form 206: Directions for Service of Original Notice

Petitioner: Complete this form if the sheriff or a process server will deliver the Petition and Original Notice to Respondent.

- Do not use this form if Respondent has already received the Petition and Original Notice.
- Do not file this form with the clerk of court in paper or electronically.
- Give this form to the sheriff or other process server with your Petition (201) and Original Notice (204 if electronically filing or 204a if filing in paper).

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| County where Petition is filed | Equity case number | | |
|--|-------------------------------------|-----------------------|--------------------|
| | heriff or Other Process Serve | er | |
| A. Sheriff In county where | Respondent will be servedCounty | | |
| Street address | City | State | ZIP code |
| B. Other process server Name of other person serv | | | |
| Street address | City | State | ZIP code |
| 2. Person to be Served | () | | |
| Your spouse 's name | Phone number | | |
| Address where your spouse can be 3. Person Requesting Serv | • | State | ZIP code |
| Your name | Phone number | | |
| Your present mailing address | City | State | ZIP code |
| 4. Special Instructions for State delivering papers to Respondent. | Service Provide information that wi | ll help the sheriff o | r process server i |
| | | | |

5. Costs of Service

Rule 17.200—Form 206: Directions for Service of Original Notice, continued

| | Check one | |
|----|--|---|
| | A. O Petitioner will pay the costs of the Sheriff If you cannot afford the costs, file form 209. | or other process server. |
| | B. Costs for Sheriff deferred by court order: | |
| | , | Clerk of court: Sign only if costs deferred |
| | | by court order |
| 6. | Notification | |
| | After completion of service, the sheriff or other pro- requesting service. | cess server will notify the person |
| | , 20 | |
| | Signed: Month Day Year | Your signature |

Rule 17.200—Form 207: Motion and Affidavit to Serve by Publication

Petitioner: Use this form only if you do not know where your spouse lives or works.

- You must contact a newspaper that is generally distributed or circulated throughout the county where you filed the Petition
- Ask if the newspaper will publish your Original Notice by Publication (208) in your divorce case.
- Tell the newspaper you need to publish the Notice once each week for three weeks in a row.
- If the newspaper can publish your Notice three weeks in a row, ask how much it will cost.
- Tell the newspaper you will call back to arrange for publishing your Notice after a judge gives you permission to publish your Notice in the newspaper.
- The fees for publication are set by statute in Iowa Code section 618.11.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| | In the Iowa District Court for | County where you file | d the Petition | County |
|--------|--|------------------------|------------------------------|----------|
| Upor | n the Petition of | | no. | |
| Petiti | ioner Full name: first, middle, last | | tion and Affiderve by Public | |
| and c | oncerning | | | |
| Resp | ondent Full name: first, middle, last | | | |
| A. | Respondent's residence Check each that applies (1) Respondent lives outside of (2) Respondent's residence and | | unknown. | |
| В. | Respondent's last known resider | nce: | | |
| В. | Respondent's last known resider Street address | nce: - City | State | ZIP code |
| В. | | _ | State Email a | |
| | Street address County Most recent date Respondent is | City () Phone number | Email a | ddress |

| Rule 17. | 200—Form 207: Motion and Affidavit to Serve by Publication, continued |
|----------|--|
| D. | Petitioner has taken these steps to find Respondent: |
| | |
| | |
| F | Petitioner will publish notice in this newspaper: |
| _ | Name of newspaper |
| F. | Petitioner asks the court to allow Petitioner to serve Respondent by publication because Respondent cannot be personally served. |
| | |

Rule 17.200—Form 207: Motion and Affidavit to Serve by Publication, continued

| 2. | Attorr Check o | ney Help ne | | | | | | | | |
|----|-------------------|---|-----------------------------|-----------------------|------------------|--------------|--------------------|--|--|--|
| | A. () | An attorney did not | help me prepare or | r fill in this pape | r. | | | | | |
| | В. О | An attorney helped | me prepare or fill in | n this paper. | | | | | | |
| | | If you check B, you mu. | st fill in the following in | formation: | | | | | | |
| | | Name of attorney or or | ganization, if any | Attorney's P.I.N | I. # – Ask the | attorney | | | | |
| | | Business address of atte | orney or organization | City | | State | ZIP code | | | |
| | | () | () | | | | | | | |
| | | Attorney's phone numb | er Attorney's fa | x number – optional | Attorney'. | s email a | ıddress – optiona | | | |
| 3. | Oath a | and Signature | | | | | | | | |
| | Ι, | | , hav | e read this Moti | on and Affic | da∨it, ar | nd I certify | | | |
| | | have read this Motion and Affidavit, and I certify Print your name under penalty of perjury and pursuant to the laws of the State of Iowa that the information I | | | | | | | | |
| | | penaity of perjury ar rovided in this Motic | - | | of lowa tha | it the in | tormation i | | | |
| | navo p | | | | | | | | | |
| | Signed o | on: Month Da | , 20, Year | Your signature* | k | | | | | |
| | Mailing | address | | ity | | State | ZIP code | | | |
| | manng | wow OSS | | , | ^ | / tutt | 211 0000 | | | |
| | (<u>Phone</u> n |) umber | Email address | Ad | lditional email | l address | s, if applicable | | | |
| | | er filing electronically or in ne form after signing it and | | ite your signature on | this form. If yo | ou are filir | ng electronically, | | | |

Rule 17.200—Form 208: Original Notice by Publication

Petitioner: Complete this form only if a judge has signed an order giving permission to publish this Notice in a newspaper.

After you take this Notice to the newspaper, promptly mail a copy of this Notice and the Petition to Respondent's last known mailing address.

Note to Petitioner: Fill in third date of publication in section 2 below.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

Newspaper: Publish only the information below this line.

| In the lowa District Court for | County Where Petition is filed |
|--|---|
| Upon the Petition of | Equity case no |
| Petitioner Full name: first, middle, last and concerning Respondent Full name: first, middle, last | Original Notice by Publication |
| Information for Respondent Named Abov Petitioner (your spouse) has filed a divorce laws Petitioner's contact information during the divorce relationer's name: First, middle, last Petitioner's present street address City | uit naming you as Respondent. |
| County (| ne number Email address Oonse |
| Month Day Year Instructions to Respondent Named Abortyou must file an Answer or a Motion with the clerk | ve of court in the above county within 20 days after ve of court in the above county within 20 days after the date ay enter a judgment against you giving Petitioner what he or |
| You should talk to an attorney at once to protect your integrated in the self-represented litigant information and family law forms. | is matter, go to the Iowa Judicial Branch website for i. |
| If you need assistance to participate in court due to a disability, contact th hearing or speech impaired may call Relay lowa TTY (1-800-735-2942). I contact information available at: http://www.iowacourts.gov/Administration | Disability coordinators cannot provide legal advice. Disability coordinator |

Rule 17.200-Form 208: Original Notice by Publication, continued

Newspaper: only publish the instructions below if your county uses electronic filing. To determine if your county uses electronic filing, check the map available on the Iowa Judicial Branch website under "eFiling," or call the clerk of court office in your county.

Additional Information for Respondent

- You must register to eFile through the Iowa Judicial Branch website at
 https://www.iowacourts.state.ia.us/Efile/ and obtain a log in and password to file and view documents in your case and to receive service and notices from the court.
- For general rules and information on electronic filing, refer to the Iowa Court Rules Chapter 16
 Pertaining to the Use of the Electronic Document Management System, available on the Iowa Judicial
 Branch website.
- For court rules on the Protection of Personal Privacy in court filings, refer to Division VI of the Iowa Court Rules, Chapter 16.

Rule 17.200—Form 209: Application and Affidavit to Defer Payment of Costs

Petitioner: Use this form only if you cannot afford to pay the fees to file and serve the Petition.

- Use this form if it would cause you to suffer a hardship if you had to pay the filing fee and cost of serving papers.
- You may need to provide proof of your income and assets and your expenses.
- Costs and fees paid to someone other than the court or sheriff cannot be waived. For example, you may have to pay to publish a legal notice in the newspaper or to hire an expert to testify.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| Equity case no | | | In the Iowa District Court for | county where your case is filed |
|--|----|------|--|--|
| Petitioner Full name: first, middle, last Defer Payment of Costs | Up | on | the Petition of | |
| Respondent Full name: first, middle, last 1. Request and Information A. I am Petitioner. B. For my Application and Affidavit, I state that: Check all that apply (1) | Pe | titi | oner Full name: first, middle, last | |
| 1. Request and Information A. I am Petitioner. B. For my Application and Affidavit, I state that: Check all that apply (1) | an | d co | oncerning | |
| A. I am Petitioner. B. For my Application and Affidavit, I state that: Check all that apply (1) | Re | spe | ondent Full name: first, middle, last | |
| B. For my Application and Affidavit, I state that: Check all that apply (1) | 1. | Re | equest and Information | |
| Check all that apply (1) | | A. | I am Petitioner. | |
| (2) I ask the court for permission to proceed without prepayment of costs and fees. (3) I am filling this Application and Affidavit in good faith. (4) I believe I am entitled to what I am asking for in this case. C. Household There are people living in my household. Number D. My household income is \$ per month. Put the total amount of all income and benefits before deductions for all members of your household. E. My income comes from: List the sources of your income. Examples: salary, wages, or benefits such as unemployment, Title 19, FIF. | | | | |
| (3) | | | (1) I am unable to pay the filing fee or se | ervice costs or other court costs. |
| (4) | | | (2) \(\subseteq \) I ask the court for permission to proc | eed without prepayment of costs and fees. |
| C. Household There are people living in my household. Number D. My household income is \$ per month. Put the total amount of all income and benefits before deductions for all members of your household. E. My income comes from: List the sources of your income. Examples: salary, wages, or benefits such as unemployment, Title 19, FIF. | | | ., | • |
| There are people living in my household. Number D. My household income is \$ per month. Put the total amount of all income and benefits before deductions for all members of your household. E. My income comes from: List the sources of your income. Examples: salary, wages, or benefits such as unemployment, Title 19, FIF | | | (4) I believe I am entitled to what I am as | sking for in this case. |
| Number D. My household income is \$ per month. Put the total amount of all income and benefits before deductions for all members of your household. E. My income comes from: List the sources of your income. Examples: salary, wages, or benefits such as unemployment, Title 19, FIF. | | C. | Household | |
| Put the total amount of all income and benefits before deductions for all members of your household. E. My income comes from: List the sources of your income. Examples: salary, wages, or benefits such as unemployment, Title 19, FIF | | | | ehold. |
| E. My income comes from: List the sources of your income. Examples: salary, wages, or benefits such as unemployment, Title 19, FIF | | D. | - | • |
| List the sources of your income. Examples: salary, wages, or benefits such as unemployment, Title 19, FIF | | _ | | fore deductions for all members of your household. |
| | | E. | - | wages or henefits such as unemployment Title 10 FIP |
| Continued on next page | | | List the sources of your meome. Examples, satury, | wages, or venezus such as unemployment, Title 12, 111. |
| Continued on next page | | | | |
| Continued on next page | | | | |
| Communica on new page | | | Continu | ed on next page |

Rule 17.200—Form 209: Application and Affidavit to Defer Payment of Costs, continued

| F. | My household has th | e following monthly expenses: |
|----|----------------------|---------------------------------|
| | (1) Rent or mortgage | \$ |
| | (2) Utilities | \$ |
| | (3) Phone | \$ |
| | (4) Food | \$ |
| | (5) Transportation | \$ |
| G. | I have \$ | in cash, checking, and savings, |

2. Attorney Help

Rule 17.200—Form 209: Application and Affidavit to Defer Payment of Costs, continued

| | | , | ation, if any | Attorney's P.I. | N. # $-Ask$ the atto | rney |
|---|---|---|---|---|----------------------|------------------|
| | Business addre | ss of attorney | or organizai | tion City | State | ZIP code |
| | ()_ Attorney's pho | ne number | (Attorne | y's fax number – optiona | Attorney's em | ail address – op |
| Section | _ | ed only if filin | ig in paper of | r Delivery r if the other party is ex tically be served on reg | | nic filing. |
| I, | | | , | certify that on | | , 20 |
| Prin | t your name | | , | certify that on $\underline{\qquad\qquad}_{Mon}$ | th Do | ıy Year |
| | of person to whon | | | City | State | ZIP code |
| Party's | s or attorney's ma | ailing address ure | , | • | | |
| Party's | s or attorney's ma | ailing address ure | , | City under penalty of per | | |
| Party's Oath I, the St provid | and Signatu Print your notate of lowa thated in this Appli | ailing address ure ame at I have rea ication and | , certify under this Application Affidavit is t | under penalty of per cation and Affidavit true and correct. | jury and pursuan | t to the laws |
| Party's Oath I, the St provid | and Signatu Print your notate of lowa thated in this Appli | ailing address ure ame at I have rea ication and | , certify under this Application Affidavit is t | under penalty of percation and Affidavit true and correct. Your signature* | jury and pursuan | t to the laws |
| Party's Oath I, the St provid | and Signatu Print your notate of lowa thated in this Appli | ailing address ure ame at I have rea ication and | , certify under this Application Affidavit is t | under penalty of per cation and Affidavit true and correct. | jury and pursuan | t to the laws |
| Party's Oath I, the St provid Signed Mailing | and Signatu Print your notate of lowa thated in this Appli | ailing address ure ame at I have rea ication and a | , certify under this Application Affidavit is t | under penalty of percention and Affidaviterue and correct. Your signature* | jury and pursuan | rmation I have |

Rule 17.200—Form 210: Affidavit of Service of Original Notice and Petition for Dissolution of Marriage

Petitioner: Use this form only if someone other than Petitioner (you), or a person who is not a sheriff or a process server, delivered a copy of the Petition and Original Notice to Respondent (your spouse).

- The person, other than Petitioner, who gave the Petition and Original Notice to Respondent, fills in this form.
- Petitioner, or the person who gave the Petition and Original Notice to Respondent, must file this form with the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| | In the Iowa Distric | t Court for | County where Pe | etition is filed | c | ounty |
|------|--|------------------------|---------------------------|--|---------------|--------------------|
| Up | on the Petition of | | Equity ca | | | |
| Pet | titioner Full name: first, middle | ; last | 1 | lavit of Serv Notice and I Dissolution (| Petitio | n for |
| and | concerning | | | , ioooidiioii | or mar | ···ugo |
| Re | spondent Full name: first, n | niddle, last | _ | | | |
| 1. | Affidavit | | | | | |
| | l, | | , delivered a | copy of the C | Driginal | Notice and |
| | Name of person – Cannot | be Petitioner, sheriff | , or process server | | | |
| | Petition for Dissolution of | f Marriage for th | is case to: | | | Check one Oa.m. |
| | | on | ath D | , 20 | at | Ор.т. |
| | Name of Respondent | Mon | nth D | ay Year | r Ti r | ne |
| | by handing Respondent | copies of the att | ached papers. | | | |
| 2. | Oath and Signature To be completed by the person | n who gave the Peti. | tion and Original N | otice to Respond | lent. | |
| | l, | | , have read t | his Affidavit o | f Servi | ce, and I certify |
| | Print your name | | | | | |
| | under penalty of perjury a have provided in this Affi | davit of Service | is true and corre | | that the | information I |
| | <u> </u> | , 20 | Your signature* | | | |
| | Signed on: Month Da | y 1ear | Tour signature* | | | |
| | Mailing address | | City | | State | ZIP code |
| | () Phone number | Email address | | Additional en | nail addr | ess – if available |
| | * If you are filing electronically, | scan the form after si | igning it and then file o | electronically. | | |
| Dece | ember 2013 | Rule | 17.200—Form 210 | | | Page 1 of 1 |

[Court Order December 19, 2013]

Rule 17.200—Form 211: Protected Information Disclosure

It is the responsibility of counsel, if any, and the parties to ensure that protected information is omitted or redacted from documents or exhibits filed with the court. The clerk of court will not review filings to determine whether the required omissions or redactions have been made. For electronic filers, see Division VI of chapter 16 of the Iowa Court Rules. For paper filers, see Iowa Rule of Civil Procedure 1.422.

Use this form to identify the full version of any protected information redacted in other documents you have filed.

If filing electronically:

- Petitioner must complete this form (211) and file it with the Petition (201) and Original Notice (204).
- Respondent must complete this form if adding or correcting protected information.
- Paper filers also may use form 211 to assist in complying with Iowa Rule of Civil Procedure 1.422.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the Iowa District Court for | County where the case is filed |
|---|------------------------------------|
| Upon the Petition of | Equity case no |
| Petitioner Full name: first, middle, last | _ Protected Information Disclosure |
| and concerning | |
| Respondent Full name: first, middle, last | _ |

information on this form.

For an explanation of a filer's responsibility and the procedures to use for protecting personal information, refer to lowa Court Rules: Chapter 16, Rules Pertaining to the Use of the Electronic Document Management System, Division VI, Protection of Personal Privacy. Rule 16.602 provides the list of protected information. Rule 16.604 provides a list of information that may be redacted.

1. Petitioner The spouse who filed for divorce.

Provide the complete version of protected information and the redacted version included in documents you file.

Name

First Last Middle Redacted Information **Protected Information Type** Complete Information (See Rules 16.602 and 16.604) (See Rule 16.605) A. Social security number XXX-XX-XXXX Last four digits only B. Financial account numbers Full account number Partial account number only C. Date of birth mm/dd/yyyy Year only D. Individual taxpayer identification numbers XXX-XX-XXXX Last four digits only

Name

Rule 17.200—Form 211: Protected Information Disclosure, continued

| E. | Personal identification numbers | Full number | Partial only |
|----|----------------------------------|------------------|---------------------|
| F. | Other unique identifying numbers | Full number | Partial only |
| G. | | | |
| | Additional protected information | Full information | Partial information |
| H. | | | |
| | Additional protected information | Full information | Partial information |
| l. | | | |
| | Additional protected information | Full information | Partial information |
| J. | | | |
| | Additional protected information | Full information | Partial information |

2. Respondent The spouse who did not file for divorce.

Provide the complete version of protected information and the redacted version included in documents you file. If Petitioner is filling out this form, provide as much information about Respondent as you can.

| First | Middle Last | t |
|---|---|---|
| Protected Information Type | Complete Information (See Rules 16.602 and 16.604) | Redacted Information (See Rule 16.605) |
| A. Social security number | XXX-XX-XXXX | Last four digits only |
| B. Financial account numbers | Full account number | Partial account number only |
| C. Date of birth | / / mm/dd/yyyy | Year only |
| D. Individual taxpayer identification numbers | | Last four digits only |
| E. Personal identification numbers | Full number | Partial only |
| F. Other unique identifying numbers | Full number | Partial only |
| G. | | |
| Additional protected information | Full information | Partial information |
| H. | | |
| Additional protected information | Full information | Partial information |
| I. | | |
| Additional protected information | Full information | Partial information |
| J. | | |
| Additional protected information | Full information | Partial information |

Check this box if you are attaching a separate sheet listing additional information for Respondent.

Check this box if you are attaching a separate sheet listing additional information for Petitioner.

Rule 17.200—Form 211: Protected Information Disclosure, continued

3. Other Parties

Provide the complete version of protected information and the redacted version included in documents you file. Provide as much information about other parties as you can.

| First | Middle Las | t |
|---|---|---|
| Protected Information Type | Complete Information (See Rules 16.602 and 16.604) | Redacted Information (See Rule 16.605) |
| A. Social security number | XXX-XX-XXXX | Last four digits only |
| B. Financial account numbers | Full account number | Partial account number only |
| C. Date of birth | / / / mm/dd/yyyy | Year only |
| D. Individual taxpayer identification numbers | XXX-XX-XXXX | Last four digits only |
| E. Personal identification numbers | Full number | Partial only |
| F. Other unique identifying numbers | Full number | Partial only |
| G. Additional protected information | Full information | Partial information |
| H. Additional protected information | Full information | Partial information |
| I. Additional protected information | Full information | Partial information |
| J. Additional protected information | Full information | Partial information |

4. Children

Provide the complete version of protected information and the redacted version included in documents you file.

| A. | Protected Information Type | Complete Information (See Rules 16.602 and 16.604) | Redacted Information (See Rule 16.605) |
|----|----------------------------|---|---|
| | (1) Child's full name | First, middle, last name | Child's initials |
| | (2) Social security number | XXX-XX-XXXX | Last four digits only |
| | (3) Date of birth | mm/dd/yyyy | Year only |

Check this box if you are attaching a separate sheet listing additional information for other parties.

Rule 17.200—Form 211: Protected Information Disclosure, continued

| B. | Protected Information Type | Complete Information (See Rules 16.602 and 16.604) | Redacted Information (See Rule 16.605) | |
|----|----------------------------|---|---|--|
| | (1) Child's full name | First, middle, last name | Child's initials | |
| | (2) Social security number | XXX-XX-XXXX | Last four digits only | |
| | (3) Date of birth | / mm/dd/yyyy | Year only | |

| C. | Protected Information Type | Complete Information (See Rules 16.602 and 16.604) | Redacted Information (See Rule 16.605) | |
|----|----------------------------|---|---|--|
| | (1) Child's full name | First, middle, last name | Child's initials | |
| | (2) Social security number | XXX-XX-XXXX | Last four digits only | |
| | (3) Date of birth | / / mm/dd/yyyy | Year only | |

| D. | Protected Information Type | Complete Information (See Rules 16.602 and 16.604) | Redacted Information (See Rule 16.605) | |
|-------------------|----------------------------|---|---|--|
| | (1) Child's full name | First, middle, last name | Child's initials | |
| | (2) Social security number | XXX-XX-XXXX | Last four digits only | |
| (3) Date of birth | | / mm/dd/yyyy | Year only | |

| E. | Protected Information Type | Complete Information (See Rules 16.602 and 16.604) | Redacted Information (See Rule 16.605) | |
|----|----------------------------|---|---|--|
| | (1) Child's full name | First, middle, last name | Child's initials | |
| | (2) Social security number | XXX-XX-XXXX | Last four digits only | |
| | (3) Date of birth | / / mm/dd/yyyy | Year only | |

[☐] Check this box if you are attaching a separate sheet listing additional children.

 $Rule\ 17.200-Form\ 211: \textit{Protected Information Disclosure},\ continued$

| Handwritten signature of Petitioner or attorney if filing in paper | Electronic signature of Petitioner or attorney if filing electronically |
|--|---|
| Law firm, if applicable | _ |

City

Phone number

Email address Additional email address, if applicable

State

ZIP code

Month
Date information provided

Mailing address

5. Information provided by:

Rule 17.200-Form 212: Joint Statement on Legal Parent

- The parties use this form if a child is born or conceived during the marriage and both parties want the court to find that one of the parties is not a **legal parent** of the child. *Note:* For purposes of this form, **legal parent** is a person who is recognized by law as a parent to a child because of marriage.
- This form tells the court that both parties agree that one party is not a biological parent and should be disestablished as
 (should no longer be) a legal parent of the child.
- This form can only be used if the party being disestablished is a legal parent of the child because of the marriage of the
 parties and there is a pending dissolution of marriage action in Iowa. Do not use this form if the party being
 disestablished is a legal parent of the child because of an affidavit, court order, or action in another state.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| iii dio lona Biodilot | Court for | County where your case is filed | | |
|---|--|--|-------------|--|
| Ipon the Petition of | | Equity case no | | |
| etitioner Full name: first, middle, la | u.st | Joint Statement on Legal Parent | | |
| nd concerning | | | | |
| espondent Full name: first, midd | dle, last | | | |
| B. Petitioner's or Responded following children be List children's initials and b | dent's name condent's unborn cl is a legent's name orn during the mare | gal parent but not a biological p | ed due date | |
| First, middle, & last initials of each child | Birth year | First, middle, & last initials of each child | Birth year | |
| (1) | | (4) | | |
| ` ' | | (5) | | |
| (2) | | (8) | | |

Rule 17.200-Form 212: Joint Statement on Legal Parent, continued

2. Biological Parent

The biological parents, if known, of the children are as follows:

| First, middle, & last initials of each child | Biological parent | First, middle, & last initials of each child |
|--|-------------------|--|
| (1) | | (4) |
| (2) | | (5) |
| (3) | | (6) |

| First, middle, & last initials of each child | Biological parent |
|--|-------------------|
| (4) | |
| (5) | |
| (6) | |

| _ | | | | | ~ | |
|---|------|--------|-----|--------|----------|----|
| 3 | Rest | Intere | ete | of the | Childre | ın |

| It is in the best interests of the children and the parties that | |
|--|-----------------------------------|
| · | Petitioner's or Respondent's name |
| is found not to be a legal parent of the child or children. | |

4. Guardian Ad Litem

We understand that the court may appoint a guardian ad litem (an attorney) for the child or children, and that we may have to pay the costs of the guardian ad litem.

5. Request

| We ask the court to find and conclude that the legal parent, | | | |
|---|--|--|--|
| Petitioner's or Respondent's name | | | |
| is not a biological parent of the child or children, including any unborn child, listed in section 1 above, and that the court disestablish that person as a legal parent of the child or children. | | | |

6. Attorney Help

| A. Petitioner Check one | | | | | | |
|-------------------------|--|-----------------|---|----------------|-----------------------|--|
| | (1) An attorney did not help me prepare or fill in this paper. | | | | | |
| | (2) An attorney helped me prepare or fill in this paper. | | | | | |
| | If you check (2), you must fill in the following information: | | | | | |
| | | | | | | |
| | Name of attorney or organization, if any | | Attorney's P.I.N. $\#$ – Ask the attorney | | | |
| | | | | | | |
| | Business address of attorney or | organization | City | State | ZIP code | |
| | () | ()_ | | | | |
| | Attorney's phone number | Attorney 's fax | : number – optional | Attorney's ema | il address – optional | |

Rule 17.200—Form 212: Joint Statement on Legal Parent, continued

| | Name of attorn | ey or organiza | tion, if any | Attorney's P.I.N. | #-Ask the attor | пеу |
|----|--|------------------------------------|---------------------|---|----------------------|-----------------------|
| | | | or organization | | State | ZIP code |
| | ()_ Attorney's phor | ne number | () Attorney's fa | x number – optional | Attorney's emo | til address – optiona |
| 0 | aths and Signat | ures | | | | |
| A. | Petitioner's Oath | n and Signat | ure | | | |
| | 1 | | have read this | s Joint Statement, an | d I certify under p | enalty of |
| | Print your name | | | a that the information | | |
| | Statement is true an | | Tino otato or row | a that the information | i i ilavo providou i | Trans some |
| | | | , 20 | Petitioner's signa | | |
| | Month | Day | Year | Petitioner's signa | ture* | |
| | Mailing address | | City | , | State | ZIP code |
| | () | | | | | |
| | Phone number | <i>I</i> | Email address | \overline{A} | dditional email ac | ldress – if available |
| | * Whether filing elect | | | ndwrite your signature file electronically | on this form. If you | ı are filing |
| | oreen orneary, sear | ine your agree o | -gg un-u | , ne creen orneury. | | |
| | Respondent's O | ath and Sigr | nature | | | |
| В. | | | have read this | s Joint Statement, an | d I certify under p | enalty of |
| В. | 1 | | | | | |
| B. | l, | | the State of low | a that the intormation | i i ilave provided i | ii tiiis ooiiit |
| B. | l, Print your name perjury and pursuan Statement is true an | it to the laws of | f the State of Iow | a that the information | · | |
| B. | perjury and pursuan | it to the laws of | f the State of Iow | a that the information | · | |
| B. | perjury and pursuan | it to the laws of | | Respondent's sign | | |
| B. | perjury and pursuan Statement is true an Month | nt to the laws of and correct. | , 20 | Respondent's sign | nature* | _ |
| B. | perjury and pursuan Statement is true an | nt to the laws of and correct. | _, 20 | Respondent's sign | | ZIP code |
| В. | perjury and pursuan Statement is true an Month | nt to the laws of ad correct. Day | , 20 | Respondent's sign | nature* | |

Rule 17.200—Form 213: Motion to Disestablish Legal Parent

- A party uses this form if a child is born or conceived during the marriage and one of the parties wants the court to find and conclude that one of the parties is not a biological parent of the child and should be *disestablished* as (should no longer be) a legal parent of the child.
- For purposes of this form, legal parent is a person who is recognized by law as a parent to the child because of marriage.
- This form can only be used if the party sought to be disestablished is a legal parent of the child because of the
 marriage of the parties and there is a pending dissolution of marriage action in Iowa. If the party sought to be
 disestablished is a legal parent of the child because of an affidavit, court order, or action in another state, do not use
 this form.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the Iowa District Court fo | County where your case is filed |
|---|---|
| Upon the Petition of | Equity case no |
| Petitioner Full name: first, middle, last | Motion to Disestablish Legal Parent |
| and concerning | |
| Respondent Full name: first, middle, last | |
| am Check one A. O Petitioner B. O Respondent Legal Parent Check each that applie A. Detitioner's or Respondent's name of Petitioner's or Respondent Sname of the following children born List children's initials and birth year | is a legal parent but may not be a biological parent's unborn child expected to be born Expected due date is a legal parent but may not be a biological parent during the marriage: |
| First, middle, & last initials of each child Birth y | rear First, middle, & last initials of each child Birth year |
| (1) | (4) |
| (2) | (5) |
| (3) | (6) |

2. Genetic Tests

Rule 17.200—Form 213: Motion to Disestablish Legal Parent, continued

| | $Ch\epsilon$ | eck e | each that applies | | |
|----|--------------|-----------|---|-------------------------------------|---------------|
| | A. | |] I agree to cooperate with getting any g | enetic test that the court orders. | |
| | B. | |] I understand that I may have to pay for | any genetic test that the court o | rders. |
| | C. | | Genetic tests* have been done and sh | | is not the |
| | | | biological parent. | Petitioner's or Respondent's name | ! |
| | | | *Note on genetic tests: Genetic testir with verified documentation of the chai evaluation report directly to the clerk of 600B.41A. | n of custody, and the laboratory | must send the |
| 3. | Re | equ | uest | | |
| | l a | sk t | the court to: | | |
| | A. | | ppoint a guardian ad litem (an attorney) f ay have to pay the costs of the guardian | | and that I |
| | B. | | rder genetic tests if needed and order the ofor testing. | at Petitioner, Respondent, and ch | nildren |
| | C. | Fir | ind that, if Petitioner's or Respondent's name | excluded by genetic testing, is n | ot a |
| | | bio ab | Petitioner's or Respondent's name ological parent of the child or children, in bove, and that the court disestablish tha hildren. | cluding any unborn child, listed in | n section 1 |
| 4. | Ch | nild | Support Recovery Unit (CSRU) | | |
| | Che | eck c | one | | |
| | A. | 0 | CSRU is providing services. Note: You must give a copy of this Motion to C | SRU if it is providing services. | |
| | B. | 0 | CSRU is not providing services. | | |
| | | | | | |
| | | | | | |

Rule 17.200—Form 213: Motion to Disestablish Legal Parent, continued

| 5. | Attorney Help Check one | | | | | | | | | |
|-----|----------------------------------|---|--------------------------------------|---------------------------------|---------------------|----------------------------------|--------------------|--------------|------------------------|--|
| | A. (|) An attorney | did not hel | p me prepa | are or | fill in this pa | per. | | | |
| | = |) An attorney | | | | | | | | |
| | Ū | If you check E | 3, you must fill | l in the follow | ing inj | formation: | | | | |
| | Name of attorney or organization | | zation, if any | if any Attorney's P.I.N. # - | | P.I.N. # - As | - Ask the attorney | | | |
| | | Business addr | ess of attorne | y or organiza | ition | City | | State | ZIP code | |
| | | | | (|)_ | | | | til address – optional | |
| | | Attorney's ph | one number | Attorne | ey's fax | : number – opti | onal Atto | rney 's emo | iil address – optional | |
| 6. | Section This do | fication of s to be comple cument, if filed | ted only if filin electronically, | ng in paper of , will automa | r if the tically | other party is be served on t | registered pa | ırties. | | |
| | l, | your name | | · | , certi | fy that on _ | Cosotla | | , 20 | |
| | Party's | of person to who | nailing addres. | | City | | | - State | ZIP code | |
| 7. | | and Signat | | | | | | | | |
| | | t your name | | . | , certif | y under pen | alty of perj | ury and p | ursuant to the | |
| | laws o | | nd correct. | | | | t the inforn | nation I h | ave provided in | |
| | Signed | on: Month | Day, | Year | Your | signature* | | | | |
| | Mailing | g address | | | City | | | State | ZIP code | |
| | (Phone | number | | nail address | | | Additional | email add | ress – if available | |
| | | her filing electron the form after sign | | | | te your signatur | e on this form | . If you are | filing electronically, | |
| Mai | rch 2014 | | | Rule | 17.200 | —Form 213 | | | Page 3 of 3 | |

[Court Order March 26, 2014]

Form 214: Reserved

Rule 17.200—Form 215: Answer to Petition for Dissolution of Marriage with Children

Respondent: You must file an Answer in the county where the Petition was filed within **20 days** after receiving the Petition and Original Notice, or the **court may enter a judgment against Respondent** giving Petitioner what he or she asked for in the Petition.

- Read the <u>Guide to Representing Yourself in an Iowa Divorce Case with Children</u> on the Iowa Judicial Branch website before using this form.
- Use this Answer form 215 if you received Petition form 201, otherwise use form 216.
- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (211) if you have not already done so.
- If filing in paper, you may use form 211.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the Iowa District Court for | where your spouse filed the Petition | у | | | |
|--|--|---|--|--|--|
| Upon the Petition of | Equity case no | | | | |
| Petitioner Your spouse's full name: first, middle, last | Answer to Petition for Dissolution of Marriage with Children | | | | |
| and concerning | | | | | |
| Respondent Your full name: first, middle, last | | | | | |
| A. Petitioner's information Check one If paragraph 1A of the Petition (form 201) is not (1) Petitioner's (your spouse's) birth year a (2) Petitioner's birth year and present resing the correct information is: Birth year Present street address | and present residence are correct in the Peti | | | | |
| County (Phone |) number Email address | | | | |
| B. Respondent's information Check one If paragraph 1B of the Petition (form 201) is not | correct, check (2) and fill in the blanks. sent residence are correct in the Petition. | | | | |

| | Present str | eet address | | City | | State | ZIP code |
|----|--|---|--|---|--|---|--------------------------------------|
| | County | | (Phone |) e number | | Email ac | ldress |
| C. | Other person, if a Fill in as much infor Check one If paragraph 1C of the | rmation as you kn | iow. | | | | |
| | | nation for the othe the Petition. | er person v | who has visit | ation or custoo | dy rights of | the children is |
| | | nation for the other the Petition. The | | | ation or custoo | dy rights of | the children is |
| | Full name: | first, middle, last | t | | | - | |
| | Present str | eet address | | City | | State | ZIP code |
| | County | | _ (| | | mail addres | |
| | eneral Informati Date and location Check one | n of the marriag | je | | | | |
| | eneral Informati Date and location Check one If paragraph 2A of t | n of the marriag | j e 201) is not | t correct, che | ck (2) and fill i | | s. |
| | Parte and location Check one If paragraph 2A of it | n of the marriag | e 201) is not e marriage | t correct, che | ck (2) and fill i | | S. |
| | eneral Information Date and location Check one If paragraph 2A of it (1) The date at (2) The date at | n of the marriag the Petition (form and location of th | e 201) is not e marriage e marriage | t correct, che | ck (2) and fill i | | ·s. |
| A. | Date and location Check one If paragraph 2A of the date at the correct that the correct tha | the Petition (formand location of that and location of the ct information is | e 201) is not e marriage e marriage | t correct, che | ck (2) and fill i | | ss. State |
| A. | Date and location Check one If paragraph 2A of the date at (2) The date at The correct | the Petition (formand location of the Information of the Information is | e 201) is not e marriage e marriage: | t correct, chece are correct is are not correct | ck (2) and fill in the Petition. ect in the Petition. City | tion. | |
| A. | Date and location Check one If paragraph 2A of a (1) The date a (2) The date a The correct Month Children Check one If paragraph 2B of the | the Petition (formand location of the Information of the Information is | e 201) is not e marriage e marriage: | t correct, chece are correct is are not correct. | ck (2) and fill in the Petition. ect in the Petition. City d all items that | tion. | |
| A. | Peneral Information Date and location Check one If paragraph 2A of the date at the correct Month Children Check one If paragraph 2B of the date at the correct one (1) The Peneral Correct one (2) The Peneral Correct one (3) The Peneral Correct one (4) The Peneral Correct one (5) The Peneral Correct one (6) The Peneral Correct one (7) The Peneral Correct one (8) The Peneral Correct one (9) The Peneral Correct one (1) The Peneral Correct one (2) The Peneral Correct one (3) The Peneral Correct one (4) The Peneral Correct one (5) The Peneral Correct one (6) The Peneral Correct one (7) The Peneral Correct one (8) The Peneral Correct one (9) The Peneral Correct one (1) The Peneral Correct one (2) The Peneral Correct one (3) The Peneral Correct one (4) The Peneral Correct one (5) The Peneral Correct one (6) The Peneral Correct one (7) The Peneral Correct one (8) The Peneral Correct one (9) The Peneral Correct one (9) The Peneral Correct one (1) The Peneral Correct one (2) The Peneral Correct one (3) The Peneral Correct one (4) The Peneral Correct one (5) The Peneral Correct one (6) The Peneral Correct one (7) The Peneral Correct one (8) The Peneral Correct one (9) The Peneral Cor | the Petition (formand location of that and location of the ct information is | e marriage a 201) is not e marriage e marriage a 201) is not e marriage a 201) is not e marriage a 302 T T T T T T T T T T T T T | t correct, chece are correct is are not correct. Tear t, check (2) and information a | ck (2) and fill in the Petition. ect in the Petition. City d all items that bout the childing | are true. | Stat |
| A. | eneral Information Date and location Check one If paragraph 2A of the date at the correct Month Children Check one If paragraph 2B of the correct of | the Petition (formand location of the and location of the and location of the and location is \overline{L} the Petition (201) is setition provides the and location of the petition does not petition | e marriage e marriage : Solution of the correct in | t correct, check are correct information a correct information | ck (2) and fill in the Petition. ect in the Petition. City d all items that bout the childination about the | are true. ren. he childrer | |
| A. | Parte and location Check one If paragraph 2A of a (1) The date a (2) The date a The correct Month Children Check one If paragraph 2B of the (1) The Portagraph 2B of the correct a. The correct are b. The correct are b. | the Petition (formation of the and location provides the attention does not provide the are children of Respondent. There are children are children are children are children in sincludes any control of the are are children and sincludes any control of the area. | e marriage e marriage e marriage : Day Y s not correct he correct in provide the n is: n under age whild born to | t correct, check are not correct information are correct information are 18 who were | ck (2) and fill in the Petition. ect in the Petition. City d all items that bout the children about the children of eadopted or be | are true. ren. he childrer both Petiti | Stat n. oner this marriage. |
| A. | Pate and location Check one If paragraph 2A of the correct (1) The date at the correct Month Children Check one If paragraph 2B of the correct (2) The Potential Check on the correct of the correct | the Petition (formation of the And location of the Petition (201) is setition provides the Andrews of the | e marriage e marriage : Day Y s not correct in provide the in is: In under age whild born to ent. | t correct, check are not correct information are 18 who were to a spouse during the correct during the correct of the correct | ck (2) and fill in the Petition. ect in the Petition. ect in the Petition. City d all items that bout the children about the children of eadopted or bring the marries. | are true. ren. he childrer both Petiti orn during 1 | Stat n. oner this marriage. |

Rule 17.200—Form 215: Answer to Petition for Dissolution of Marriage with Children, continued

| _ | 1-1416141 | - C - I- II - I |
|----|----------------|-----------------|
| (: | Identification | of children |

Check one

If paragraph 2C of the Petition (201) is not correct, check (2) and provide the correct information about the children's identification.

(1) The children are identified correctly in the Petition.

(2) The children are not correctly identified in the Petition. The correct information is:

| First, middle, & last initials of each child | Birth year |
|--|------------|
| a. | |
| b. | |
| c. | |

| First, middle, & last initials of each child | Birth year |
|--|------------|
| d. | |
| e. | |
| f. | |

☐ Check this box if you have attached a separate sheet listing additional children.

D. Children's living arrangements

Check one

If paragraph 2D of the Petition (201) is not correct, check b and provide the correct information about the children's residence.

| İ. | Children: | Initials | Initials | | ials | | Initials | | Initi | ials | _ |
|------|------------|-----------------|----------|------|------|-----------------|----------|------|-------|-----------------|--------|
| | Lived with | 1 Adult name | | from | mm | / <u></u> | / | _ to | mm | _ | _/ |
| | At City | | | | tate | | 2000 | | | | JJ J J |
| ii. | Children: | Initials | Initials | | ials | | Initials | | Initi | ials | |
| | Lived with | 1 Adult name | | from | mm | $-\frac{1}{dd}$ | / | _ to | mm | _/ <u></u> | _ / |
| | At City | | | S | tate | | | | | | |
| iii. | Children: | Initials | Initials | | ials | | Initials | | Initi | ials | _ |
| | Lived with | 1 Adult name | | from | mm | _ | / | _ to | | $-\frac{1}{dd}$ | _/ |
| | At | | | | tate | | 222 | | | | |
| | | | | | | | | | | | |

 $Rule\ 17.200 — Form\ 215: \textit{Answer to Petition for Dissolution of Marriage with Children}, continued$

| | | Livea witr | 1 | | trom | | _/ | _/ | _ to | | _/ | _ / |
|----|--------------------|---------------------|---------------------------------|--|----------------|----------|---------|--------------|-------|---------|---------|----------------|
| | | | Adult name | | | mm | dd | yyyy | | mm | dd | уууу |
| | | At | | | <u> </u> | tate | | | | | | |
| | | | | | D | ittic | | | | | | |
| | V. | Children: | Initials | Initials | | tials | — | Initials | | Initi | als | _ |
| | | | | | | | | , | | | , | , |
| | | Lived with | ר Adult name | | from | mm | - | _ | _ to | mm | - | - [/] |
| | | At | | | | | | | | | | |
| | | City | | | \overline{S} | tate | | | | | | |
| | | Check this | box if you ha | ve attached a : | separate | e sheet | listin | g addition | al cł | ildrer | 7. | |
| | | | | a for less than si are complicated | | | | | | | an ord | er about |
| E. | Petitioner | 's residen | ce | | | | | | | | | |
| | (1) The o i | nly reason t | that Petitione | r (your spous | se) is li | ving ir | low | a is just to | ge | t a div | orce. | |
| | | ue | | | | | | | | | | |
| | Ŏ Fa | | ioner does not divorce, chec | live in Iowa, k "False." | or if Pei | titionei | r lives | s in Iowa f | or re | asons | other | than just |
| | (2) If you o | lisagree with | n paragraph 2 | E(2) of the Pet | tition (2 | 01), fil | l in th | ne blanks. | | | | |
| | Petitio | ner has live | ed in lowa for | the last | ye | ars ar | nd | m | onth | IS | | |
| | In | | | county. | | | | | | | | |
| F. | Parties' re | sidence | | | | | | | | | | |
| | Check each | that is true | | | | | | | | | | |
| | (1) Pe | etitioner (yo | ur spouse) h | as lived in lov | wa for r | more t | han d | one year. | | | | |
| | If you did n | ot check (1) | or (2), you sho | ould talk to an | attorne | y. | | | | | | |
| | (2) Re | espondent (| you are Resp | oondent) is a | reside | nt of lo | owa. | | | | | |
| G. | Condition | of the mar | riage | | | | | | | | | |
| | Check all th | at are true | _ | | | | | | | | | |
| | (1) 🗆 Th | ie marriage | is broken an | d cannot be | saved. | | | | | | | |
| | | | | e going on in ain in 4. You : | | | | | ·. | | | |
| | (3) 🗆 Pe | titioner did | not file the F | etition in goo | d faith | for the | e pur | pose of e | ndin | g the | marri | age. |
| | (4) 🗆 Co | ounseling w | ill not save th | ne marriage. | If coun | seling | may : | save the m | arrio | age, de | o not c | heck (4). |
| Н. | Responde | | | | | | | | | | | |
| | Check each | | 5 | | | .1.4 _ | | | | | | |
| | Th | ere are spec | | oondent) is ir may prevent th an attorney. | | - | | | vard | if you | are in | the |
| | | | | | | | | | | | | |

| Rul | e 17.2 | 00—Form | 215: Answ | er to Petition for Dissoluti | on of Marriage with C | hildren, continued | | |
|-----|--------|---------------------|--|--|--|----------------------|-----------------------------------|---------------|
| | | (2) | Respo | ondent is in prison o | rjail at | C:1:4 | in | |
| | | | | are in prison or jail, y y, appointed to protec | ou may be entitled | to a "guardian a | Stand litem," a person, us cases. | |
| | I. | Protect | | no contact orders | | | | |
| | | $(1) \bigcirc$ | There | is neither a "protecti ner (your spouse). | ve order" nor a "n | o contact order" | between Responder | nt (you) and |
| | | (2) | There i | | | | Respondent and Peti | tioner. |
| | | | | ounty and state where | | | | |
| | | | a. 00 | drity and state where | the order came in | County | | State |
| | | | b. Co | ourt case number: | | | | |
| | | | | | | | | |
| 3. | | iher Ca eck A or | | bout the Childi | en | | | |
| | A. | | | nformation in 3 in skip to 4. | the Petition abo | ut other cases | about the children | is correct. |
| | | If you c (1) Ju | heck B, f venile co eck a or l Th | | rmation below. rt case. case. The correc | t information is: | | |
| | | | i. Co | ounty and state of the | juvenile court case | e: County | | State |
| | | | ii. Co | ourt case number: | | County | | Diale |
| | | | | neck one | | | | |
| | | | | Concurrent juri | sdiction has been | granted | | |
| | | | | ☐ Concurrent juri | | _ | | |
| | | | () | _ | as not given concur | ent jurisdiction (pe | ermission), then child cu | istody cannot |
| | | (2) Cu | stody or | rder | | | | |
| | | Ch | eck a or | b. | | | | |
| | | a. | O Th | nere is no custody o | rder. | | | |
| | | b. | | nere is a custody or check b, fill in the foll | | | | |
| | | | <i>1, you</i> c | County and state w | | | | |
| | | | I. | County and state w | nere ine custody t | | County | State |
| | | | ii. | Court case number | : | | | |

Rule 17.200-Form 215: Answer to Petition for Dissolution of Marriage with Children, continued (3) Child support order Check a or b. There is no child support order. There is a child support order. If you check b, fill in the following information: County and state where the child support order came from: County State Court case number: 4. Other Information Respondent denies anything in the Petition that Respondent has not agreed is correct. In addition, Respondent provides the following information: All of the basic information you need to tell the court is on this form. Provide other information only if you need to explain something. 5. Respondent's Request A. Respondent asks the court to: Check all that apply. The court will only consider items that are checked. If you do not know what you want, talk to an attorney. (1) End the marriage of Respondent (you) and Petitioner (your spouse). Decide custody and visitation. (3)
Order child support and medical support. (4) Order payment of school or college tuition. (5) Fairly divide the property and the debts of the parties. (6) Order that Petitioner pay the court fees. (7) Order that Petitioner pay for Respondent's attorney's fees before the divorce is final If you check (7), you must file form 222. (8) Order that Petitioner pay spousal support (alimony) to Respondent. If you check (8), you must file form 222. (9) Change Respondent's last name to: Name can only be changed to name on birth certificate or name used immediately prior to the marriage. Print your former or birth name (10) Order counseling to save the marriage. (11) Other request:

 $Rule\ 17.200 — Form\ 215: \textit{Answer to Petition for Dissolution of Marriage with Children}, continued$

| 6. | Attorney Help Check one |
|----|--|
| | A. O An attorney did not help me prepare or fill in this paper. B. O An attorney helped me prepare or fill in this paper. If you check B, you must fill in the following information: |
| | Name of attorney or organization, if any Attorney's P.I.N. # – Ask the attorney |
| | Business address of attorney or organization City State ZIP code |
| | () () |
| 8. | If Respondent is filing in paper Check one A. Respondent will accept service of documents at the attorney's address listed above; or B. Respondent will accept service of documents in this case at the mailing address below. Certification of Service by Mailing or Delivery Section 8 to be completed only if filing in paper or if the other party is exempt from electronic filing. This document, if filed electronically, will automatically be served on registered parties. |
| | I,, certify that on, 20 |
| | Print your name Month Day Year I mailed or gave a copy of this Answer to the other party or the other party's attorney at this address: |
| | Name of person to whom I delivered or mailed it |
| | Party's or attorney's mailing address City State ZIP code |

 $Rule~17.200\\ --Form~215: \textit{Answer to Petition for Dissolution of Marriage with Children}, continued$

| €. | Oath and Signatur | е | | | | | |
|----|--|---------------------|---------|---------------------|----|-------|--|
| | I, Print your name of perjury and pursua | int to the law | s of th | | | - | under penalty have provided |
| | in this Answer is true | and correct. | | | | | |
| | Signed on: Month | <i>Day</i> , 20 | Year | Your signature | ?* | | |
| | Mailing address | | | City | | State | ZIP code |
| | Phone number * Whether filing electronica scan the form after signing | ally or in paper, y | | handwrite your sign | | | ress – if available filing electronically |

Important Instructions for filing this form on next page.

Instructions for Rule 17.200-Form 215: Answer to Petition for Dissolution of Marriage with Children, continued

Do not file these instructions

Instructions for Filing an Answer to a Petition for Dissolution of Marriage with Children

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

☐ Filing your Answer electronically

- If your divorce case was filed in a county that uses electronic filing, you must register to electronically file. For help with registration, see the eFiler's User Guide How to Register Pro Se (Self Represented) for eFiling on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you when you electronically file.)
- Log in to EDMS on the Iowa Judicial Branch website and file your Answer. The login page can be accessed from two different paths: you may directly log in to EDMS; or from the judicial branch website menu, you may select "eFiling > eFile (EDMS) Login."
- For help, see *How to eFile to an Existing Case*.
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the efiling of your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My Filings, correct the error, and resubmit your Answer. For help, see *How to Resubmit a Returned Filing*.
- The NEF will indicate if your spouse is exempt from electronic filing requirements, in which case, you must mail or serve in paper a copy of the document on your spouse if he or she does not have an attorney.

Filing your Answer in paper

- Make two photocopies of the original.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where the Petition was filed. The county is listed at the top of the Petition (form 201).
- The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- Keep one of the copies for your records.
- Serve one of the copies of your Answer on your spouse (Petitioner).
- You can hand one of the copies of the Answer form to your spouse, or mail a copy to your spouse at the address shown on the Petition.
- If your spouse has an attorney, you should serve the Answer by mailing a copy to the attorney at the attorney's address on the Petition if box 7A on the Petition is checked.

Do not file these instructions

December 2013 Instructions for Rule 17,200—Form 215

Page 1 of 1

Rule 17.200—Form 216: General Answer to a Petition for Dissolution of Marriage with Children

Respondent: You must file an Answer in the county where the Petition was filed within **20 days** after receiving the Petition and Original Notice, or the **court may enter a judgment against Respondent** giving Petitioner what he or she asked for in the Petition.

If the Petition you received is on form 201, use form 215 for your Answer.

Read the <u>Guide to Representing Yourself in an Iowa Divorce Case</u> on the Iowa Judicial Branch website before using this form.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (211).
- If filing in paper, you may use form 211 to provide any protected information in full.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the Iowa District Court for | County where Petition is filed |
|--|--|
| Upon the Petition of | Equity case no. |
| Petitioner You spouse's full name: first, middle, last | General Answer to a Petition for Dissolution of Marriage with Children |
| and concerning | |
| Respondent Your full name: first, middle, last | |

- 1. Respondent's Answer You are Respondent.
 - A. Respondent admits that the following paragraphs in the Petition are true:

List the numbers of the paragraphs in the Petition that you think are true. If you decide later that the paragraphs you list here are not true, it may be too late to change your answer.

- B. Respondent denies that the following paragraphs in the Petition are true:
- C. Respondent does not know whether the following paragraphs in the Petition are true:

List the numbers of the paragraphs in the Petition that you are not sure about. If you cannot say a paragraph or a part of a paragraph is true or not true, it may be because you do not know something, such as a date, place, or when something happened.

Rule 17.200—Form 216: General Answer to a Petition for Dissolution of Marriage with Children, continued

D. Children's living arrangements

Places where the children have lived during the last five years and the parent(s) or adult(s) who acted as parents:

| (1) | Children: | Initials | Initials | * | | itials | <u></u> | tials | |
|-----|---|--------------------|---|--------------------|----------|-----------------------------|-----------------------|----------------|-----------------|
| | Imitais | Immais | muus | , | 1711 | ituis | 1711 | uais | |
| | Lived with | pa o | from | 1 | _/ | _/ | _ to | _/ | _/ |
| | Aunthu | ne | | rnm | ии | уууу | mm | ии | уууу |
| | At City | | State | | | | | | |
| (2) | Children: | | | | | | | | |
| (-) | Initials | Initials | Initials | ř | In | itials | Ini | tials | |
| | Lived with | | from | ı | _/ | _/ | to | _/ | _/ |
| | Adult na | me | | mm | dd | yyyy | to | dd | yyyy |
| | At | | State | | | | | | |
| (3) | Children: | | | | | | | | |
| (0) | Initials | Initials | Initials | ř | In | itials | Ini | tials | |
| | Lived with | | from | 1 | / | / | to | / | / |
| | Adult na | те | | mm | dd | yyyy | to | - dd | _ / |
| | At | | State | | | | | | |
| | | | siaie | | | | | | |
| (4) | Children: | Initials | Initials | * | | itials | | tials | |
| | | | 1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | |
| | Lived with | me | from |) | -/ | _/ | _ to | -/ | _/ |
| | | | | mm | аа | уууу | mm | ш | уууу |
| | At | | State | | | | | | |
| (5) | Children: | | | | | | | | |
| (5) | Initials | Initials | Initials | 7 | _ In | itials | Ini | tials | |
| | Lived with | | from | ı | _/ | _/ | to | _/ | _/ |
| | Adult na | | | mm | dd | уууу | mm | dd | уууу |
| | At | | Charles | | | | | | |
| | | | | 1: | | 1:2: 1 - 1 | 1 . 1 | | |
| | Check this box if y | | - | | _ | | | | -1-44 1- |
| | If the children have able to get custody. | The rules are comp | or six months, yo plicated and you | ou may . may ne | ed to ta | io get a di ilk to an at | vorce, but torney. | you mış | gut not be |

Rule 17.200—Form 216: General Answer to a Petition for Dissolution of Marriage with Children, continued

| Ε. | | | | e or no contact orders | |
|----|-----|-------|--------------|---|----------------|
| | | eck e | | | |
| | (1) | C | | nere is neither a "protective order" nor a "no contact order" between Responc etitioner (your spouse). | lent (you) and |
| | (2) | C |) The | nere is a "protective order" or "no contact order" between Respondent and Pe | etitioner. |
| | | | If y | you check (2), fill in the following information: | |
| | | | a. | County and state where the order came from: | _ |
| | | | | County | State |
| | | | b. | Court case number: | |
| F. | Otl | her | cas | ses about the children | |
| | Che | eck (| (1) or | or (2) | |
| | (1) | C |) Th | nere are no other cases about the children. If you check (1), skip to G. | |
| | (2) | Č |) Th | nere are other cases about the children. | |
| | abo | ut c | ustoc | In order from out of state about the children, an Iowa court may not be able to issurdy or visitation. The rules are complicated and you may need to talk to an attorn $k F(2)$, fill in the applicable information below. | |
| | | | | | |
| | a. | | | ile court i <i>or</i> ii. | |
| | | i. | | There is no juvenile court case. | |
| | | ii. | | There is a juvenile court case. | |
| | | ". | | you check ii, fill in the following information: | |
| | | | | County and state of the juvenile court case: | |
| | | | (~) | County | State |
| | | | (b) |) Juvenile court case number: | |
| | | | | $Check(i) \ or(ii)$ | |
| | | | | (i) Concurrent jurisdiction has been granted. | |
| | | | | (ii) Concurrent jurisdiction has not been granted. | |
| | | | | If the juvenile court has not given concurrent jurisdiction (permission,) then child be decided in this case. You should talk to an attorney. | custody cannot |
| | b. | С | ıstoc | dy order | |
| | | Yo | u mi | ight not be able to get custody in Iowa if there is a custody order entered in another | her state. |
| | | Ch | eck i | i or ii. | |
| | | İ. | | There is no custody order. | |
| | | ii. | | There is a custody order. | |
| | | | If y | you check ii, fill in the following information: | |
| | | | (a) | County and state where the custody order came from: | |
| | | | | County | State |
| | | | (b) | Court case number: | |
| | | | | | |
| | | | | | |

| Rule 17.200- | Form 216: General Answer to a Petition for Dissolution of Marriage with | Children, continued | |
|--------------|---|-----------------------|-------|
| C. | Child support order | | |
| | Check i or ii. | | |
| | i. There is no child support order. | | |
| | ii. There is a child support order. | | |
| | If you check ii, fill in the following information: | | |
| | (a) County and state where the child support order came from | | |
| | | County | State |
| | (b) Court case number: | _ | |
| G. Re | spondent denies anything in the Petition that is not admi | itted in this Answer. | |
| 11 04 | han to farmer allows | | |
| H. Ot | her information: | | |
| | | | |
| | | | |
| | | | |
| | | | |

2. Respondent's Request If you do not know what you want, talk to an attorney.

Respondent asks the court to: Write here what you would like the court to do. For example, tell the court if you want a divorce. Be brief. Do not write long descriptions.

Rule 17.200—Form 216: General Answer to a Petition for Dissolution of Marriage with Children, continued

| 3. | . Attorney Help | | | |
|----|--|----------------------------|----------------------------------|--|
| | Check one | | | |
| | A. An attorney did not help me prepare | | | |
| | B. () An attorney helped me prepare or f | | | |
| | If you check B, you must fill in the followin | g information: | | |
| | Name of attorney or organization, if any | Attorney's P.I.N. ‡ | #-Ask the attorney | v |
| | Business address of attorney or organization | on City | State | ZIP code |
| | ()(|) | Attornev's email | address – optional |
| 4 | . Service Instructions | s june rum e er opnomia | Title, mey a commune | opiiona |
| ٠. | If Respondent is filing in paper | | | |
| | Check one | | | |
| | A. Respondent will accept service of do | ocuments at the attor | ney's address lis | ted above; or |
| | B. Respondent will accept service of do | cuments in this case : | at the mailing ad | dress below. |
| 5. | . Certification of Service by Mailing or Section 5 to be completed only if filing in paper or i This document, if filed electronically, will automatic | f the other party is exemp | | ling. |
| | | | - | . 20 |
| | I,, C | Month | | , <u>Year</u> |
| | I mailed or gave a copy of this Answer to the address: | ne other party or the o | other party's atto | orney at this |
| | Name of person to whom I delivered or mailed it | | | |
| | Party's or attorney's mailing address | City | State | ZIP code |
| 6. | . Oath and Signature | | | |
| | I P | nave read this Answe | ar and I certify u | nder nenalty |
| | Print your name | | | |
| | of perjury and pursuant to the laws of the S in this Answer is true and correct. | State of lowa that the | information I ha | ve provided |
| | | V * | | |
| | Signed on: Month Day Year | Your signature* | | |
| | Mailing address | City | State | ZIP code |
| | | | 1 | ······································ |
| | Phone number Email address * Whether filing electronically or in paper, you must han | | tional email addres | |
| | scan the form after signing it and then file electronical | | ы _з ыт. 4 уой аге зиг | aig eieca oracally, |
| | Important Instructions for | filing this form on next | : page. | |

Instructions for Rule 17.200—Form 216: General Answer to a Petition for Dissolution of Marriage with Children

Instructions for Filing an Answer to a Petition for Dissolution of Marriage with Children

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

☐ Filing your Answer electronically

- If your divorce case was filed in a county that uses electronic filing, you must register to electronically file.
 For help with registration, see the eFiler's User Guide <u>How to Register Pro Se (Self Represented) for eFiling</u> on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you when
 you electronically file.)
- Log in to EDMS on the Iowa Judicial Branch website and file your Answer.
 The login page can be accessed from two different paths: you may <u>directly log in to EDMS</u>; or from the judicial branch website menu, you may select "eFiling > eFile (EDMS) Login."
- For help, see *How to eFile to an Existing Case*.
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the efiling of
 your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My
 Filings, correct the error, and resubmit your Answer. For help, see <u>How to Resubmit a Returned Filing</u>.
- The NEF will indicate if your spouse is exempt from electronic filing requirements, in which case, you must
 mail or serve in paper a copy of the document on your spouse if he or she does not have an attorney.

Filing your Answer in paper

- Make two photocopies of the original.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where
 the Petition was filed. The county is listed at the top of the Petition (form 201).
- · The clerk will time-stamp your forms and copies.
- · The clerk will take the original and give the copies back to you.
- · Keep one of the copies for your records.
- Serve one of the copies of your Answer on your spouse (Petitioner).
- You can hand one of the copies of the Answer form to your spouse, or mail a copy to your spouse at the address shown on the Petition.
- If your spouse has an attorney, you may serve the Petition by mailing a copy to the attorney at the attorney's address.

Do not file these instructions

December 2013

Instructions for Rule 17.200-Form 216

Page 1 of 1

[Court Order December 19, 2013]

Forms 217 to 220: Reserved

Rule 17.200—Form 221: Affidavit for Temporary Custody and Visitation

Form 221 is for either party to tell the court about custody and visitation before the case is finished, or to have a witness tell the court about custody and visitation before the case is finished.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the Iowa District Court for | County where the case is filed |
|---|---|
| Upon the Petition of | Equity case no |
| Petitioner Full name as it appears on the Petition: first, middle, last | Affidavit for Temporary Custody and Visitation |
| and concerning | |
| Respondent Full name as it appears on the Petition: first, middle, last | |
| is: C. I understand that a judge may consider | last party; or initials of child (Do not use child's full name.) this Affidavit to determine temporary custody and were present in court, I would testify as follows: |
| ☐ Check here if there are additional pages att Contin | tached. ued on next page |

Rule 17.200—Form 221: Affidavit for Temporary Custody and Visitation, continued

| Atto Chec | orney Help k one | | | | | | |
|--------------------------------|---|---------------------------------|---|--|----------------|-----------------------|----------------------|
| | An attorne | did not he | elp me prep | are or fill in th | is paper. | | |
| в. (| An attorne | / helped m | e prepare o | or fill in this pa | per. | | |
| | Name of atto | mey or organ | nization, if any | v Attorne | ey 's P.I.N. # | – Ask the attorn | ney |
| | Business add | ress of attorn | ey or organiz | ation City | | State | ZIP code |
| | () | | (|) | | | |
| | Attorney's ph | one number | Attorn | ey's fax number | – optional | Attorney's ema | nil address – option |
| l, | h and Signa | | | | | | |
| I, laws | | lowa that I ue and corre | have read t | | | | |
| I, laws in thi | of the State of is Affidavit is tr | lowa that I ue and corre | have read t | this Affidavit aı | nd that the i | | |
| I, laws in thi | of the State of | lowa that I ue and corre | have read t | | nd that the i | | |
| I, laws in thi | of the State of is Affidavit is tr | lowa that I ue and corre | have read t | this Affidavit aı | nd that the i | | |
| I, laws in thi | of the State of is Affidavit is trued on: Month | lowa that I ue and corre | have read t | this Affidavit an | nd that the i | nformation I l | have provided |
| I, laws in thi | of the State of is Affidavit is trued on: Month | lowa that I ue and corre | have read t | this Affidavit an | nd that the i | nformation | have provided |
| I,laws in thi Signe Maili (| of the State of is Affidavit is trued on: Month ing address | Flowa that I ue and correct Day | have read to ect. , 20 Year mail address | this Affidavit and Your signature. City City | re* | nformation State | have provided |

Rule 17.200—Form 222: Motion in a Dissolution of Marriage with Children

Use this form if you want to ask the court to do something after your court case has already started.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the lowa District Court for | ounty where your case is filed | County |
|--|---------------------------------------|-------------------------------|
| Upon the Petition of | Equity case no | |
| Petitioner Full name: first, middle, last | Motion in a Disso Marriage with C | |
| and concerning | | |
| Respondent Full name: first, middle, last | | |
| Check one A. O Petitioner B. O Respondent 1. Request A. I ask the court to Check all that apply. If you check any box in A, you | ı must tell the court why you are mak | ing this request in B. |
| (1) Change the hearing date that has be | | <u>Day</u> , 20 <u>Year</u> . |
| (2) Award me temporary financial suppo | <i>Month</i> ort. | Day Year |
| (3) Order temporary custody and visitati | on. | |
| (4) Order temporary child support and m | nedical support. | |
| (5) Order counseling (conciliation). | | |
| (6) Set a hearing date for a divorce Dec | ree by default. | |
| (7) Shorten the 90-day waiting period fo | r getting a divorce Decree. | |
| (8) Award me attorney's fees before the | divorce is final. | |
| (9) Award spousal support (alimony) to | me before the divorce is final. | |
| (10) Order genetic testing to decide pater appear for testing. | nity and require that Petitioner, | Respondent, and child |
| (11) Appoint an attorney to represent the | child (required when asking to d | lisestablish paternity). |
| Continued of | on next page | |

| Rule 17.200—Form 222: Motion in a | Dissolution of Marriage with Children, continued |
|---|--|
| (12) Other request | Explain |
| | |
| | |
| | |
| B. I am making the requ | lest(s) in this Motion because: |

Page 3 of 3

2. Attorney Help

Rule 17.200—Form 222: Motion in a Dissolution of Marriage with Children, continued

| | Name of attor | ney or organiz | ation, if any | Attorney's P.I. | N. # $-Ask$ the atta | orney |
|---|---|-----------------------------|--|---|---|------------------------------|
| | Business addr | ess of attorney | or organization | ı City | State | ZIP code |
| | () _ Attorney's pho | one number | (Attorney's |) fax number – optiona | Attorney's en | nail address – op |
| Sectio | _ | ted only if filin | g in paper or if | Delivery the other party is ex tlly be served on reg | | ic filing. |
| I. | | - | | - | _ | . 20 |
| Prin | ıt your name | | , 00 | ertify that on | nth D | ay Yea |
| | 's or attorney's m | nailing address | - C | ity | State | ZIP code |
| | - | _ | · C | ity | State | ZIP code |
| Party | 's or attomey's m | _ | | | | |
| \overline{Party} Oath I, \overline{Prir} | n and Signat | ure | , ce | ertify under penal | ty of perjury and | pursuant to t |
| \overline{Party} Oath I, \overline{Prir} laws | n and Signat nt your name of the State of | lowa that I h | , ce ave read this ask the court | ertify under penal Motion and that t to grant this Mot | ty of perjury and he information I | pursuant to t |
| Party Oath I, Priv laws this M | n and Signat nt your name of the State of | lowa that I h | , ce ave read this ask the court | ertify under penal | ty of perjury and he information I | pursuant to t |
| Party Oath I, Priv laws this M | n and Signat at your name of the State of Motion is true a | lowa that I h | ave read this ask the court 20 | ertify under penal Motion and that t to grant this Mot | ty of perjury and he information I | pursuant to t |
| Party Oath I, Priv laws this M | n and Signat at your name of the State of Motion is true a | lowa that I h nd correct. I | ave read this ask the court 20 | ertify under penal Motion and that to to grant this Mot our signature* | ty of perjury and he information I ion. | pursuant to the have provide |

Rule 17.200—Form 222

December 2013

Rule 17.200—Form 223: Response to a Motion

Use this form if your spouse has filed a Motion (most likely form 222) and you disagree with what your spouse is asking the court to do in that Motion.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| County where your case is filed |
|--|
| Equity case no |
| Response to a Motion |
| |
| |
| Motion to: In at apply. If you check any box in B, you must tell the court mas been set for |
| |

| Rule 17.200—Form 223: Response to a Motion, continued |
|--|
| (10) Order genetic testing to decide paternity and require that Petitioner, Respondent, and child appear for testing. |
| (11) Appoint an attorney to represent the child (required when asking to disestablish paternity). |
| (12) Other request Explain |
| C. I disagree with the Motion because: |

Rule 17.200—Form 223: Response to a Motion, continued

| 3. | Attorney Help | | | | | | | | |
|-----|---|---|--------------------------------------|-------------------|-------------|------------------------|--|--|--|
| | Check one | | | | | | | | |
| | A. An attorney did not help me prepare or fill in this paper. | | | | | | | | |
| | B. An attorney helped | | | | | | | | |
| | If you check B, you mu. | st fill in the follow | ving information: | | | | | | |
| | N | ······································ | 40 2- D.T. | 37 11 4-1-41 | | | | | |
| | Name of attorney or or | дапіzапоп, іј апу | Attorney s P.1. | N. # — ASK U | е апоте | V | | | |
| | Business address of att | orney or organiza | ation City | | State | ZIP code | | | |
| | () Attorney's phone numb | (|) | | | | | | |
| | Attorney's phone numb | er Attorne | ey's fax number – optio | onal Attor | ney's ema | iil address – optional | | | |
| 4. | Certification of Service | | | | | | | | |
| | Section 4 to be completed only is | | | | | filing. | | | |
| | This document, if filed electronic | - | - | - | | | | | |
| | I, | | , certify that on $\underline{}_{M}$ | outh | — <u>Da</u> | , 20 | | | |
| | - | | | | | | | | |
| | I mailed or gave a copy of | tnis Kesponse | to the other party | or the other | er party | s attorney at | | | |
| | this address: | | | | | | | | |
| | 77 | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | | |
| | Name of person to whom I delive | ered or mailed it | | | | | | | |
| | | | | | | _ | | | |
| | Party's or attorney's mailing ad | ldress | City | | State | ZIP code | | | |
| 5. | Oath and Signature | | | | | | | | |
| ٠. | _ | | | والمراجع والمراجع | سلميما س | | | | |
| | I,laws of the State of lowa tha | at I have road t | , certify under peni | aity of perju | ry and p | ursuant to the | | | |
| | in this Response is true and | | nis Response and | mat the mid | mation | i nave provided | | | |
| | in this response is true and | rooncot. | | | | | | | |
| | Signed on: Month Day | , 20 | Your signature* | | | | | | |
| | Signed on: Month Day | Year | Your signature* | | | | | | |
| | 16:1: | | Cit. | | Ctosto | 710 1- | | | |
| | Mailing address | | City | | State | ZIP code | | | |
| | () | | | | | | | | |
| | Phone number | Email address | | Additional e | mail addi | ress – if available | | | |
| | * Whether filing electronically or in | n paper, you must h | andwrite your signature | e on this form. | If you are | filing electronically, | | | |
| | scan the form after signing it and | then file electronic | eally. | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Dec | cember 2013 | Rule | : 17.200—Form 223 | | | Page 3 of 3 | | | |

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children

Each party must complete one of these forms. Provide as much information as you can.

Caution: This form may require you to provide protected or sensitive information.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (211), if you have not already done so.
- ffiling in paper, you may use form 211 to provide any protected information in full if you have not already done so.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the lowa District Court for | County |
|--|---|
| | County where your case is filed |
| Upon the Petition of | Equity case no. |
| Petitioner Full name: first, middle, last | Financial Affidavit for a Dissolution of Marriage with Children |
| and concerning | |
| Respondent Full name: first, middle, last | |
| l am | |
| Check one | |
| A. Petitioner | |
| B. Respondent | |
| l <u>,</u> Print your name | , state that this is a true and complete statement |
| of my assets, debts, and present in | come as of the $\underline{\underline{Day}}$ day of $\underline{\underline{Month}}$, 20 $\underline{\underline{Year}}$. |
| 1. Assets Things you and your spouse own. | • |
| A. Real estate Attach additional sheets if necessary. | |
| *Owner (Whose name is on the deed?): $P = P$ | etitioner $R = Respondent \ J = Joint (Both)$ |

| Type of real estate | Owner* | Market value What it would sell for | Debt Total amount you still owe on it and to whom owed | Net value Market value minus debt owed |
|--|--------|---|--|--|
| (1) Homestead Address of the home you own & where you usually live | | \$ | \$ to: | \$ |
| (2) Other real estate Address of other houses, apartments, or land that you own. | | \$ | \$ to: | \$ |

[☐] Check this box if you have attached a sheet with additional information on real estate.

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

B. Vehicles

Includes cars, trucks, motorcycles, and other motorized vehicles.

*Owner (Whose name is on the car or vehicle title?): P = Petitioner R = Respondent J = Joint (Both)

| Vehicles Make (e.g. Ford) Year | Owner* | Market value What it would sell for | Debt Total amount you still owe on it and to whom owed | Net Value Market value minus debt owed | |
|--------------------------------------|--------|---|--|--|--|
| (1) | | \$ | \$ | \$ | |
| | | Ψ | to: | Ψ | |
| (2) | | \$ | \$ | 4 | |
| | | Φ | to: | \$ | |
| (3) | | c | \$ | Ф. | |
| | | \$ | to: | \$ | |

[☐] Check this box if you have attached a sheet with additional information on vehicles.

C. Securities, stocks, & bonds

*Owner (Whose name is on the securities, stocks, or bonds?): P = Petitioner R = Respondent J = Joint (Both)

| Securities, stocks, & bonds Company name | Owner* | Market value What it would sell for | Debt Total amount you still owe on it and to whom owed | Net value Market value minus debt owed |
|--|--------|---|--|--|
| (1) | | \$ | \$ | \$ |
| (1) | | Ψ | to: | Ψ |
| (2) | | \$ | \$ | \$ |
| (2) | | Ψ | to: | y . |
| (2) | | œ. | \$ | 6 |
| (3) | | \$ | to: | \$ |

[☐] Check this box if you have attached a sheet with additional information on securities, stocks, and bonds.

D. Life insurance

*Owner (Whose name is on the policy?): P = Petitioner R = Respondent J = Joint (Both)

| Life insurance Company name | Owner* P,R,J | Cash value Not death benefit | Loan from cash value Total amount still owed on loan | Net value Cash value minus loan owed |
|--------------------------------|-----------------|---------------------------------|---|---|
| (1) | | \$ | \$ | \$ |
| (2) | | \$ | \$ | \$ |
| (3) | | \$ | \$ | \$ |

[☐] Check this box if you have attached a sheet with additional information on life insurance.

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

E. Bank accounts

*Owner (Whose name is on the checking or savings account?): P = Petitioner R = Respondent J = Joint (Both)

| Checking & savings accounts Bank or Credit Union name If you do not use bank accounts, write "Cash" | Owner* | Cash value | Personal loans or overdraft accounts Total amount you still owe on it | Net value Cash value minus loan / overdraft owed |
|---|--------|------------|--|---|
| (1) | | \$ | \$ | \$ |
| (2) | | \$ | \$ | \$ |
| (3) | | \$ | \$ | \$ |

[☐] Check this box if you have attached a sheet with additional information on checking and savings accounts.

F. Household contents

*Owner: P = Petitioner R = Respondent J = Joint (Both)

| Household contents Describe | Owner* | Market value What it would sell for | Debt Total amount you still owe on it and to whom owed | Net value Market value minus debt owed |
|---------------------------------|--------|---|--|--|
| (1) Furniture | | \$ | \$ | \$ |
| a. | | | to: | |
| b. | | \$ | to: | \$ |
| | | | \$ | |
| C. | | \$ | to: | \$ |
| d. | | \$ | \$ | \$ |
| | | | to: | |
| (2) Appliances / Electronics a. | | \$ | \$ | \$ |
| | | | to: | |
| b. | | \$ | to: | \$ |
| C. | | \$ | \$ | \$ |
| C. | | Ψ . | to: | Ψ |
| d. | | \$ | \$ | \$ |
| | | | to: | · |
| (3) Other contents | | \$ | \$ | \$ |
| a. | | | to: | |

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

| b. | \$ | \$ to: | \$ |
|----|----|--------|----|
| C. | \$ | \$ to: | \$ |

G. Retirement assets

*Owner (Whose name is on the retirement account?): P = Petitioner R = Respondent J = Joint (Both)

| Retirement assets Examples: Pensions, IRAs, 401(k)s, annuities, etc. | Owner* | Market value What it would sell for | Loan from retirement account Total amount you still owe on it and to whom owed | Net value Market value minus loan owed |
|--|--------|---|--|---|
| (1) | | \$ | \$ to: | \$ |
| (2) | | \$ | \$ | \$ |
| | | | to: | |
| (3) | | \$ | to: | \$ |

☐ Check this box if you have attached a sheet with additional information on retirement assets.

H. Other assets

Items not listed in the other boxes should be listed here. For example: jewelry, furs, guns, sporting goods, farm animals.

*Owner: P = Petitioner R = Respondent J = Joint (Both)

| Other assets Describe | Owner* | Market value What it would sell for | Debt Total amount you still owe on it and to whom owed | Net value Market value minus debt owed |
|-----------------------|--------|---|--|--|
| (1) | | \$ | \$ to: | \$ |
| (2) | | \$ | \$ to: | \$ |
| (3) | | \$ | \$ to: | \$ |

☐ Check this box if you have attached a sheet with additional information on other assets.

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

Totals

| (1) Total from attached sheets | Listed in 1A-H. | \$ |
|--------------------------------|-----------------|---------|
| (2) Total net value of assets | Listed in 1A-H. | \$ 0.00 |

2. Other Debts

Debts may include things such as past due balances on utilities, money owed to a landlord for damages after moving, credit card debt, and loans from friends, family, or banks.

Include as "Other Debts" money you or your spouse owe that you did not include in the "Debt" or "Loan" columns in 1A-H.

*Whose debt is it? P = Petitioner R = Respondent J = Joint (Both)

| Other debts List only those not included as "debt" or "loans" under "Assets" in part 1. | Whose debt?* P,R,J | Amount owed |
|---|--------------------------|-------------|
| A. | | \$ |
| В. | | \$ |
| C. | | \$ |
| D. | | \$ |
| E. | | \$ |
| F. | | \$ |
| G. | | \$ |
| H. | | \$ |
| L | | \$ |
| J. | | \$ |
| К. | | \$ |
| L | | \$ |
| M. | | \$ |
| N. | | \$ |
| O. Totals from attached sheets, if any Check this box if you have attached a sheet with additional information on other debts and enter the total. | | \$ |
| Total other debts Including amounts shown on attached sheets, if any. | \$ | |

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

3. Income and Deductions

The deductions listed in section 3 are the deductions allowed by the Iowa Child Support Guidelines and are subtracted when determining net income.

A. Petitioner

April 2014

(1) Income and Deductions If you are Respondent, give your best estimate for each amount. *How often is income paid or deduction taken?

 $W = Weekly \ B = Bi$ -weekly (every other week) $M = Monthly \ T = Two times a month$

| Current income and deductions | Ir | ncome | Deductions | | |
|---|---------------------------|--------------------------------|----------------------------|---------------------|--|
| for Petitioner Sources of income and deductions, not including Social Security benefits | How often paid?* W,B,M,T | Gross amount Before deductions | How often taken?* W,B,M,T | Amount of deduction | |
| a. Wages from employer | | | | | |
| Employer name: | | \$ | | \$ | |
| Job title: | | | | | |
| b. Wages from employer | | | | | |
| Employer name: | | \$ | | \$ | |
| Job title: | | | | | |
| c. Unemployment assistance | | \$ | | \$ | |
| d. Workers' compensation | | \$ | | \$ | |
| e. Pension / Retirement | | \$ | | \$ | |
| f. Veteran's benefits | | \$ | | \$ | |
| g. Other Identify: | | \$ | | \$ | |
| h. Other Identify: | | \$ | | \$ | |
| i. Other <i>Identify:</i> | | \$ | | \$ | |
| j. Mandatory pension contribution List required contribution only (e.g. IPERS, TIAA/CREF). Contributions above the required amount are optional and not allowed as a deduction. | | | | \$ | |
| k. Union Dues | | | | \$ | |
| **I. Prior court-ordered child support Paid to: | | | | \$ | |
| **m Prior court-ordered medical support Paid to: | | | | \$ | |
| **n. Prior court-ordered spousal support (alimony) Paid to: | | | | \$ | |
| Totals from attached sheets, if any Check this box if you have attached a sheet with additional information on Petitioner's income and deductions. | | \$ | | \$ | |
| Totals | | \$ 0.00 | | \$ 0.00 | |
| Current income and deductions for Petitioner | | Income total | | Deductions total | |

^{**}Under "Amount of deduction," list the amount of child support or spousal support actually paid under a prior court order (an order filed before this action). If child support payments were not made through the Child Support Recovery Unit, attach proof of payments for the past 12 months.

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

| | pro List | vide the | ner's other chile as much informat initials and birth; include any childi | ion as yo vear of e | u can. ach child for w | hom Peti | | | Respondent, |
|----------|-------------|-------------|---|------------------------|---------------------------------|------------|---------------------------------|----------------------|-------------|
| | Fi | rst, | middle, & last s of each child | Birth | vear F | irst, mic | ddle, & last f each child | Birth yea | r |
| | i. | | | | i | V. | | | |
| | ii. | | | | \ \ \ | ·. | | | |
| | iii. | | | | | i. | | | |
| , | | | eck this box if you titioner is the legal | | ached a sheet l | isting add | ditional childre | en for whom | _ |
| | | | ner's actual chi todial parent only. | | - | | | - | |
| | \$ | Am | per | Frequer | ісу | | | | |
| (4) | Pet | titio | ner's income fr | om Soc | ial Security | benefits | s, if any: | | |
| | a. | Su | pplemental Se | curity In | come (SSI), | if any: | | | |
| | | i. | Supplemental Sec | curity Inco | ome (SSI) paid | to Petitic | ner for disabili | ty: \$ | per mont |
| | | ii. | Supplemental Sec | curity Inco | me (SSI) paid | to childre | en for their disa | ıbility: \$ | per montl |
| | | iii. | List the children | in Petitio | oner's home \ | who rece | eive SSI bene | fits <i>Use init</i> | ials only: |
| | | | First, middle, & initials of each | | Birth year | | First, middle initials of ea | | Birth year |
| | | | (a) | | | | (d) | | |
| | | | (b) | | | | (e) | | |
| | | | (c) | | | | (f) | | |
| | | | | | have attached y Income (SSI) | | isting addition | al children w | ho receive |
| | b. | So | cial Security Di | sability | (SSD) or So | cial Se | curity Retire | ment (SSF | ₹), if any: |
| | | i. | Benefit paid for F | etitioner | | | \$ | | per month |
| | | ii. | Benefit paid for e | ach child | in Petitioner's | home | \$ | | per month |
| | | iii. | Number of childre | en receiv | ing benefits | | ch | ildren | |
| | c. | So | cial Security Di | sability | (SSD), if an | y: | | | |
| | | i. | Paid to children f | or their d | isability: | | \$ | | per month |
| | | ii. | List the children i | n Petitior | er's home who | receive | SSD benefits | Use initials on | ly: |
| per 2013 | 3 | | | | Rule 17.200— | Form 224 | | | Page 7 of 1 |

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

| First, middle, & last initials of each child | Birth year | First, mid initials of |
|--|------------|---------------------------|
| (a) | | (d) |
| (b) | | (e) |
| (c) | | (f) |

| First, middle, & last initials of each child | Birth year |
|--|------------|
| (d) | |
| (e) | |
| (f) | |

[☐] Check this box if you have attached a sheet listing additional children who receive Supplemental Security Income (SSD).

B. Respondent

(1) Income and Deductions If you are Petitioner, give your best estimate for each amount.

*How often is income paid or deduction taken?

 $W = Weekly \quad B = Bi$ -weekly (every other week) $M = Monthly \quad T = Two times a month$

| Current income and deductions | Ir | ncome | Deductions | | |
|---|---------------------------|--------------------------------|---------------------------------|---------------------|--|
| for Respondent Sources of income and deductions, not including Social Security benefits | How often paid?* W,B,M,T | Gross amount Before deductions | How often taken?* W,B,M,T | Amount of deduction | |
| a. Wages from employer Employer name: Job title: | | \$ | | \$ | |
| b. Wages from employer Employer name: Job title: | | \$ | | \$ | |
| c. Unemployment assistance | | \$ | | \$ | |
| d. Workers' compensation | | \$ | | \$ | |
| e. Pension / Retirement | | \$ | | \$ | |
| f. Veteran's benefits | | \$ | | \$ | |
| g. Other Identify: | | \$ | | \$ | |
| h. Other Identify: | | \$ | | \$ | |
| i. Other <i>Identify</i> : | | \$ | | \$ | |
| j. Mandatory pension contribution List required contribution only (e.g. IPERS, TIAA/CREF). Contributions above the required amount are optional and not allowed as a deduction. | | | | \$ | |
| k. Union Dues | | | | \$ | |
| **I. Prior court-ordered child support Paid to: | | | | \$ | |
| **m.Prior court-ordered medical support Paid to: | | | | \$ | |
| **n. Prior court-ordered spousal support (alimony) Paid to: | | | | \$ | |

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

| ☐ Ch ad | tals from attached sheets, if any leck this box if you have attached a ditional information on Responden ductions. | | | \$ | | \$ | |
|---|---|------------|--|-----------------------------------|------------|------------------|--|
| Total | s | | | \$ 0.00 | | \$ 0.00 | |
| Current income and deductions for Respondent | | | | Income total | | Deductions total | |
| **Under "Amount of deduction," list the amount of child support or spousal support actually paid under a prior court order (an order filed before this action). If child support payments were not made through the Child Support Recovery Unit, attach proof of payments for the past 12 months. (2) Respondent's other children with no court-orderd support, if any: If you are Petitioner, provide as much information as you can. | | | | | | | |
| | List the initials and birth year of each child for whom Respondent is the legal parent. | | | | | | |
| | Do not include any children involved in this case. | | | | | | |
| | First, middle, & last initials of each child | Birth year | | middle, & last s of each child | Birth year | | |
| | | | | | | | |

| ials of each child | Birth year | initials of each child | Birth year |
|--------------------|------------|------------------------|------------|
| | | iv. | |
| | | v. | |
| | | vi. | |
| | | | |

| (3) | • | child care expenses due to employment, if any: If you are not the custodial parent, skip to (4). |
|-----|-----------|---|
| | \$ per | Frequency |

- (4) Respondent's income from Social Security benefits, if any:
 - a. Supplemental Security Income (SSI), if any:

| İ. | Supplemental Security Income (SSI) paid to Respondent for disability: \$ | _per month |
|-----|--|------------|
| ii. | Supplemental Security Income (SSI) paid to children for their disability: \$ | _per month |

iii. List the children in Respondent's home who receive SSI benefits Use initials only:

| First, middle, & last initials of each child | Birth year | First, midd initials of e |
|--|------------|------------------------------|
| (a) | | (d) |
| (b) | | (e) |
| (c) | | (f) |

| First, middle, & last initials of each child | Birth year |
|--|------------|
| (d) | |
| (e) | |
| (f) | |

[☐] Check this box if you have attached a sheet listing additional children who receive Supplemental Security Income (SSI).

Check this box if you have attached a sheet listing additional children for whom Respondent is the legal parent.

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

| b. | Social Security Disabili | ity (SSD) or So | cial Securi | ty Retiremer | nt (SSR), if a | ny: |
|--------------------|--|--|----------------|------------------------------------|-------------------------|---------|
| | i. Benefit paid for Respor | ndent | \$ | | pe | r month |
| | ii. Benefit paid for each ch | nild in Respondent | s home \$_ | | pe | r month |
| | iii. Number of children rec | eiving benefits | _ | children | | |
| C. | Social Security Disabili | ity (SSD), if an | y: | | | |
| | i. Paid to children for thei | | \$ | | pe | r month |
| | ii. List the children in Res | pondent's home w | ho receive S | SD benefits Us | e initials only: | |
| | First, middle, & last initials of each child | Birth year | | st, middle, & l tials of each c | | h year |
| | (a) | | (d) | | | |
| | (b) | | (e) | | | |
| | (c) | | (f) | | | |
| | ☐ Check this box if you h | ave attached a she | et listing add | litional childre | n who receive | |
| | for Petitioner If you are Restitioner has health insulation. True False If you check a, list the frequency of the point o | rance available sency and cost of k (2). k k k k k k k k k k | e through e | employer. nce paid. ther week) M | unt. I = Monthly | |
| | Type of employer health | insurance | W,B,M | | Cost | |
| | Single health insurance | | | \$ | | |
| | Family health insurance | | | \$ | | |
| (2) Pe a. b. | titioner has health insulation True True False If you check a, list the frequility ou check b, continue to (*How often paid? $W = We$ $T = Two$ times a month | nency and cost of h | nealth insurae | nce paid. | nployer. M = Monthly | |

Rule 17.200-Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

True False

If you check b, continue to (4).

| Type of other health insurance | How often paid?* W,B,M,T | Cost |
|--------------------------------|----------------------------|------|
| Single health insurance | | \$ |
| Family health insurance | | \$ |

(3) Petitioner pays medical support for the child or children as required by court order.

If you check a, list the frequency and cost of medical support paid.

| | Medical support paid to | How often paid?* W,B,M,T | Cost |
|--------------------------|---|---------------------------|----------------|
| | | | \$ |
| | | | \$ |
| | | | \$ |
|) Pe a. b. | titioner has dental insurance availad True False If you check a, list the frequency and cost of the second of t | of dental insurance paid. | |
| | Type of employer dental insurance | How often paid?* W,B,M,T | Cost |
| | | | |
| | Single dental insurance | | \$ |
| | Single dental insurance Family dental insurance | | \$ |
| 5) Pe a. b. | | lental insurance paid. | \$ n employer. |

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

| Type of other dental insurance | How often paid?* W,B,M,T | Cost |
|--------------------------------|----------------------------|------|
| Single dental insurance | | \$ |
| Family dental insurance | | \$ |

| | , | | Ť |
|-----|---------------------------------------|-----------------------|--------|
| | | | |
| (6) | Petitioner pays other medical expensi | es not covered by ins | urance |

a. True
b. False

If you check a, list the cost and frequency of other medical expenses paid that are not covered by insurance. Include all medical, dental, vision, etc. expenses as one lump sum.

If you check (6)b, continue to 4B, Costs for Respondent.

*How often paid? W = Weekly B = Bi-weekly (every other week) M = Monthly T = Two times a month

| How often paid?* W,B,M,T | Cost |
|---------------------------|------|
| | \$ |
| | \$ |

- B. Costs for Respondent If you are Petitioner, give your best estimate for each amount.
 - (1) Respondent has health insurance available through employer.

a. O True

b. False

If you check a, list the frequency and cost of health insurance paid. If you check b, continue to (2).

*How often paid? W = Weekly B = Bi-weekly (every other week) M = Monthly T = Two times a month

| Type of employer health insurance | How often paid?* W,B,M,T | Cost |
|-----------------------------------|---------------------------|------|
| Single health insurance | | \$ |
| Family health insurance | | \$ |

| (2) | Res | pondent has health insurance thro | ugh a source other tl | nan employer. |
|-----|-------------|--|-----------------------|---------------|
| | a. (| True | | |

False
 If you check a, list the frequency and cost of health insurance paid.

If you check b, continue to (3).

*How often paid? W = Weekly B = Bi-weekly (every other week) M = Monthly T = Two times a month

order.

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

| Type of other health insurance | <u> </u> | en paid?* Cost |
|--------------------------------|----------|----------------|
| Single health insurance | | \$ |
| Family health insurance | | \$ |

(3) Respondent pays medical support for the child or children as required by court

| *How often paid? $W = Weekly E$ $T = Two times a month$ | | M = Monthly |
|---|--|---------------------------------------|
| Medical support paid to | How often paid?* W,B,M,T | Cost |
| | | \$ |
| | | \$ |
| | | \$ |
| False If you check a, list the frequency and If you check b, continue to (5). *How often paid? W = Weekly E T = Two times a month | | x) $M = Monthly$ |
| If you check a, list the frequency and If you check b, continue to (5). *How often paid? W = Weekly E | B = Bi-weekly (every other weekly often paid?* | (c) $M = Monthly$ Cost |
| If you check a, list the frequency and If you check b, continue to (5). *How often paid? W = Weekly E T = Two times a month | B = Bi-weekly (every other week | , , , , , , , , , , , , , , , , , , , |
| If you check a, list the frequency and If you check b, continue to (5). *How often paid? W = Weekly E T = Two times a month Type of employer dental insuran | B = Bi-weekly (every other week | Cost |

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

| Type of other dental insurance | How often paid?* W,B,M,T | Cost |
|--------------------------------|---------------------------|------|
| Single dental insurance | | \$ |
| Family dental insurance | | \$ |

| | | (6) Res | spondent pays oth | ner medical | exper | nses not covered l | oy insurance. | |
|----|----|----------|---|------------------|----------|-------------------------|----------------------------|------------------|
| | | a. | ○ True | | | | | |
| | | b. (| False | | | | | |
| | | | If you check a, list the insurance. Include a | | | • | • | ? not covered by |
| | | | If you check (6)b, con | ntinue to 5, Exp | enses. | | | |
| | | | *How often paid? W T = Two times a mon | | B = Bi-v | veekly (every other we | eek) $M = Mor$ | ıthly |
| | | | How often paid?* W,B,M,T | Cost | | | | |
| | | | | \$ | | | | |
| | | | | \$ | | | | |
| 5. | Ex | pense | s | | | | | |
| | A. | Living a | arrangements | | | | | |
| | | Check or | ne | | | | | |
| | | (1) | My spouse and I liv | e in the same | home | | | |
| | | (2) | My spouse and I do | not live in th | e same | home. | | |
| | _ | | | | | | | |
| | | Му ехр | | | | | | |
| | | Note: Yo | ou must complete this s | section if you o | r your s | pouse want spousal s | upport (alimony | <i>י)</i> . |
| | | | ften paid?: $W = Week$ so times a month $A = A$ | | kly (eve | ery other week) $M = 1$ | Monthly | |
| | | Туре с | of expense | | | Paid to | How often paid?* W,B,M,T,A | Monthly payment |

| Type of expense | Paid to | How often paid?* W,B,M,T,A | Monthly payment |
|--|---------|----------------------------|--------------------|
| (1) House payment or rent | | | \$ |
| (2) Food At home & restaurants | | | \$ |
| (3) Transportation (gas, bus fare) Not car loan payments – see (12). | | | \$ |
| (4) Clothing | | | \$ |
| (5) Medical, dental Not health insurance payments— see (10). | | | \$ |

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

| (6) Utilities (gas, electric) | \$ |
|---|---------|
| (7) Phone | \$ |
| (8) Cable / satellite television / internet | \$ |
| (9) Car insurance payment | \$ |
| (10) Health insurance payment | \$ |
| (11) Credit card payments | \$ |
| (12) Car loan payments | \$ |
| (13) Other loan payments | \$ |
| (14) Other expense Identify: | \$ |
| (15) Other expense Identify: | \$ |
| (16) Other expense Identify: | \$ |
| (17) Totals from attached sheets, if any Check this box if you have attached a sheet with additional information on your expenses. | \$ |
| Total expenses | \$ 0.00 |

Continued on next page

6. Attorney Help

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

| | Name of attorn | ney or organiza | ation, if any | Attorney's P.I.N. # | – Ask the attorr | ney |
|---|--|----------------------------------|--|--|------------------|----------------|
| | Business addr | ess of attorney | or organization | City | State | ZIP code |
| | ()_ | | _ (|) fax number – optional | | |
| | Attorney's pho | one number | Attorney's | fax number – optional | Attorney's ema | il address – e |
| l ma | iled or gave a | copy of this F | | rtify that on <i>Month</i> davit to the other part | - | |
| attor | ney at this add | ress: | | | | |
| | of nerson to who | m I delivered o | r mailed it | | | |
| Name | oj person to wno. | | | | | |
| | 's or attorney's m | | C | ty | State | ZIP code |
| Party Oat | 's or attomey's m | ailing address | C | ty | State | ZIP code |
| Party Oat | 's or attomey's m | ailing address | C | <i>ty</i> rtify under penalty of | 2.000 | |
| \overline{Party} Oatl I, $\underline{}$ \overline{Pri} laws | 's or attomey's m h and Signate nt your name | ailing address ure | , ce | rtify under penalty of printing the results of printing the results and result | perjury and p | ursuant to |
| Party Oatl I, | 's or attomey's ment of the State of ided in this Fina | ure lowa that I hancial Affidavi | , ce ave read this t is true and c | rtify under penalty of printing and printing | perjury and p | ursuant to |
| Party Oatl I, | 's or attomey's m h and Signate nt your name of the State of | ailing address ure | , ce ave read this t is true and c | rtify under penalty of printing the results of printing the results and result | perjury and p | ursuant to |
| Party Oatl I, Pri laws provi | 's or attomey's ment of the State of ided in this Fina | ure lowa that I hancial Affidavi | , ce ave read this t is true and c | rtify under penalty of principal principal Affidavit and correct. | perjury and p | ursuant to |
| Party Oatl I, | 's or attorney's ment of the State of ided in this Final | lowa that I hand incial Affidavi | , ce ave read this t is true and co | rtify under penalty of prince of the penalty of prince of the penalty of prince of the penalty of prince of the penalty of the | perjury and p | ursuant to |

Rule 17.200—Form 225: Affidavit of Mailing Notice

Petitioner: You **must** file this Affidavit if you served Notice by Publication in a newspaper and you ask the court for a divorce Decree by default. Petitioner **must** also complete the oath and signature section on the next page.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the Iowa District Court for | County where your case is filed |
|---|---|
| Upon the Petition of | Equity case no. Affidavit of Mailing Notice |
| Petitioner Full name: first, middle, last | Amauri of maining frontion |
| and concerning | |
| Respondent Full name: first, middle, last | |
| Attorney Help | |
| B. An attorney helped me prepare or f If you check B, you must fill in the following | • • |
| Name of attorney or organization, if any | Attorney's P.I.N. # – Ask the attorney |
| Business address of attorney or organizati | on City State ZIP code |
| ()(| 's fax number – optional Attorney's email address – o |

Petitioner's Oath and Signature on next page

Rule 17.200—Form 225: Affidavit of Mailing Notice, continued

| l, | , | certify under penalt | ty of perjur | y and p | oursuant to th |
|--|-----------------------|---------------------------------------|--------------|--------------|----------------|
| Print your name | | | | | |
| laws of the State of low | | | | | nt by ordinar |
| | Day | | Year | r | |
| mail with proper postag | e, the following pa | aper or papers: | | | |
| Check one | | | | | |
| Original Notice and | Petition for Dissol | ution of Marriage, or | | | |
| Notice of Intent to | File a Written Applic | cation for Default Dec | roo | | |
| | | | | | |
| • | • • • | | | | |
| to Respondent's last-kn | • • • | | | | |
| • | • • • | | | | |
| • | • • • | | | State | ZIP code |
| to Respondent's last-kn | • • • | ollows: | | State | ZIP code |
| to Respondent's last-kn | • • • | ollows: | | State | ZIP code |
| to Respondent's last-kn | own address as f | ollows: | | State | ZIP code |
| to Respondent's last-kn Respondent's street address | • • • | Ollows: | | State | ZIP code |
| to Respondent's last-kn Respondent's street address | own address as f | ollows: | | State | ZIP code |
| to Respondent's last-kn Respondent's street address Signed on: Month | own address as f | Ollows: City Petitioner's signature | | | |
| to Respondent's last-kn Respondent's street address | own address as f | Ollows: | | State State | ZIP code |
| to Respondent's last-kn Respondent's street address Signed on: Month | own address as f | Ollows: City Petitioner's signature | | | |

^{*} Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.

Rule 17.200—Form 226: Notice of Intent to File Written Application for Default Decree

Petitioner: If Respondent has not filed an Answer or Motion within 20 days from the date of Service of the Original Notice or date of the Acceptance of Service, you may seek a Default Decree.

Before Petitioner asks the court for a Default Decree of Dissolution of Marriage, Petitioner must file this form (226).

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the Iowa District Cou | rt for | ty where your case is filed | Co | unty |
|--|--|-------------------------------------|----------------|-------------|
| | Coun | ty wnere your case is filea | | |
| Upon the Petition of | E | Equity case no | | |
| Petitioner Full name: first, middle, last | | Notice of Intent Application for | | |
| and concerning | | | | |
| Respondent Full name: first, middle, las | t | | | |
| To: ${Respondent's first name} = {M}$ | iddle name | Last name | | |
| Respondent s first name W | іаале пате | Last name | | |
| Date of Notice: | $\phantom{aaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaa$ | rear | | |
| | ortant Notice to | | | |
| Handwritten signature of Petitioner or atto | hould seek legal | s/ | Petitioner or | · Attorney |
| The person who provided the signature | e above must fill ir | | | |
| Present street address (If attorney, fire | m address) City | y | State | ZIP code |
| () | | | | |
| () Phone number | Email address | | _ | |
| Instructions for Petitioner | | | | |
| ☐ Filing your Notice electronic | ally | | | |
| EDMS will automatically serve Respor | ndent unless Respond | ent is exempt from electronic t | iling requirem | ients. |
| Filing your Notice in paper (| if you have received | d permission from the cour | t to file in p | aper) |
| Deliver a copy of this form to Resp. | | | | |
| Complete form 225 and file the ori File the original of this form (226) at Keep a copy for your records. | • | | | |
| December 2013 | Rule 17.200- | -Form 226 | | Page 1 of 1 |

[Court Order December 19, 2013]

Rule 17.200—Form 227: Request for Relief in a Dissolution of Marriage with Children

Use this form only if you have filed a Petition for Dissolution of Marriage (201) and:

- Your spouse (Respondent) did not file an Answer, or
- Your spouse will not work with you to prepare a Settlement Agreement (228).

Caution: This form may require you to provide protected or sensitive information.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (211) if you have not already done so.
- If filing in paper, you may use form 211 to provide any protected information in full if you have not already done so.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the Iowa District Court for | County where your case | is filed | County |
|--|---|-------------|-------------------------|
| Upon the Petition of | Equity case no. | | |
| Petitioner Full name: first, middle, last | | Relief in a | Dissolution Children |
| and concerning | | | |
| Respondent Full name: first, middle, last | | | |
| Personal Information Fill in all information and you fear for your safety, you may leave your action I am Check A or B and fill in C and D. A. Petitioner | | | mea oy your spous |
| B. Respondent C. Petitioner's birth year and present resi | dence: | | |
| | dence: Birth year City | State | ZIP code |
| C. Petitioner's birth year and present resi | Birth year City () Phone number esidence: | Email a | |
| C. Petitioner's birth year and present resingular country. Petitioner's present street address. Country | Birth year City () Phone number | Email a | |

2. Request for Relief

Rule 17.200—Form 227: Request for Relief in a Dissolution of Marriage with Children, continued

| Α. | Childre | en Check all that are true | | | |
|----|--------------------|---|--|---------------|----------------------|
| | (1) | Petitioner and Respondent agree to the Plan (229). A parenting plan must be pro- | | | |
| | (2) | Petitioner and Respondent do not a I filed a Proposed Parenting Plan (2 Request for Relief. | | | o the court with the |
| | (3) | Petitioner has taken the children in | the middle course. Attach | certificate | |
| | (4) | Respondent has taken the children | in the middle course. Atta | ch certifica | ite |
| В. | Break | down of marriage | | | |
| | The ma | arriage is broken down and cannot be | e saved. | | |
| C. | Couns | seling | | | |
| | Counse | eling will not save the marriage. | | | |
| D. | Waitin | g period before decree Check one | | | |
| | (1) 🔿 | More than 90 days have passed sin an Original Notice. | ce Respondent accepted | service or | was served with |
| | (2) | Fewer than 90 days have passed si an Original Notice, but I want the co hearing because: | The second secon | | |
| E. | Financ (1) (2) (2) | This paper explains how I would like ial affidavits Check one I filed a Financial Affidavit (224). I didentity and value of all assets and I am asking that the court not require | pertify that I have fully disc | losed all ir | |
| F. | The amo | support Check all that are true ount of child support is determined using | | | |
| | of Humo | an Services provides a child support esti | mator on its website. Go to: | https://chilo | lsupport.ia.gov/. |
| | (1) | Petitioner shall pay child support to R | espondent in the amount of | f\$ | per month. |
| | (2) | Petitioner shall pay child support to a | third party in the amount of | \$ | per month. |
| | | Third party's full name: first, middle, last | t | | |
| | | Present street address | City | State | ZIP code |
| | | County | | | |

| Rule 17.200—l | Form 227: Request for F | Relief in a Dissolu | tion of $Marriage$ | with Children, continued | l | | |
|---------------|--|---------------------------------------|--------------------|---|---------------|----------------|----------------|
| (3) | ☐ Respondent sha | all pay child sup | port to Petition | er in the amount of \$ | | pe | r month. |
| (4) | ☐ Respondent sha | all pay child sup | port to a third p | party in the amount of | \$ | pe | r month. |
| | Third party's full | name: first, mida | lle, last | | | | |
| | Present street ad | dress | City | | State | ZIP code | |
| | County | | | | | | |
| (5) | Child support paym | ents shall begi | n on the | day of | | , 2 | 20 |
| | for the following chi | ldren: | | Month | | | Year |
| | First, middle, & initials of each | | Birth year | First, middle, 8 initials of each | | Birtl | h year |
| | a. | | | d. | | | |
| | b. | | | e. | | | |
| | c. | | | f. | | | |
| | ☐ Check this b | ox if you are att | aching a separa | ate sheet listing additio | nal childr | en. | |
| (6) G. Tax | Guidelines amo | ount. <i>If you che</i> quested:\$ | ck (6), write the | igher or lower than t amount you want and onth ne Guidelines amour | ł explain v | why in b. | |
| | l ask the court to se | et the tax deduc | ction as follow | s: | Check or | ne for eac | h child |
| | First, middle, & last initials of each child | Birth year | Parent who s | should now claim deduction | Every Year | Even Years | Odd Years |
| | a. | | | | 0 | \overline{O} | \overline{O} |
| | b. | | | | 0 | Ō | Ō |
| | c. | | | | 0 | Ŏ | Ō |
| | d. | | | | O | Ô | Ō |
| | e. | | | | Ŏ | Ŏ | Ŏ |
| | f. | | | | Ō | Ō | Õ |
| ' | ☐ Check this box if | you are attachii | ng a separate sh | neet listing additional o | children. | | |

| ule 17. | 200—Form 227: Request for Relief in a Dissolution of Marriage with Children, continued |
|---------|---|
| | (2) The deduction will start in tax year $\underline{\hspace{1cm}}_{Year}$ |
| | Note: The parent with custody must sign IRS Form 8332 before the non-custodial parent can take the deduction. Tax forms are available from the IRS website: http://www.irs.gov . The earned income tax credit is not the same as the tax exemption. |
| Ή. | Health care expenses |
| | I ask the court to set the health care expenses as follows: Check all that apply |
| | Petitioner Respondent |
| | (1) will provide medical support (health insurance). |
| | (2) will pay the first \$ of uncovered medical |
| | expenses for the children. After that amount is spent, then uncovered medical expenses shall be paid |
| | % by Petitioner and% by Respondent. |
| | (3) Shall pay cash medical support in the amount of \$ per month. |
| | |
| I. | Division of Personal Property Check one |
| | (1) All of the personal property obtained during the marriage has been divided. I ask that Petitioner will keep the personal property in Petitioner's possession, and Respondent will keep the personal property in Respondent's possession. <i>If you check</i> (1), <i>skip to</i> J. |
| | (2) Our personal property has not been divided. I ask that our personal property be divided as follows: |
| | a. Petitioner will get the following as Petitioner's separate personal property: |
| | b. Respondent will get the following as Respondent's separate personal property: \[\textstyle \text{Check this box if you attached a separate sheet listing additional information about personal property.} \] Note on retirement accounts and pensions: If the divorce Decree gives you or your spouse part of the other person's retirement accounts or pension, a separate order called a Qualified Demostic Pelations Order (ODBO). |
| 920 | person's retirement account or pension, a separate order called a Qualified Domestic Relations Order (QDRO) must be entered. QDROs are complicated; you should ask an attorney for help with a QDRO. |
| J. | Division of real estate |
| | For each parcel of real estate you own, provide the following information. Attach a separate sheet for each additional parcel. |
| | (1) Ownership of real estate Check one |
| | a. We do not own any real estate. If you check a, skip to K. |

| | Street address, County of This land is described in the deed or | |
|--|--|--|
| State of | | |
| e real estate shall be: | This land is described in the deed or | contract as follows |
| | | |
| | t divided% to Petitioner and . | % |
| to Respondent. | | |
| \simeq | | |
| \simeq | , | |
| Other Explain | | |
| nging title to real estate is a complicat u will be changing title to real estate, y n of debts ne There are no debts. | ed and important step in the divorce process. you should talk to an attorney. | |
| | | e rone we. |
| Petitioner will pay the followin | g debts: | |
| i. Business or person to who a debt is owed | ii. Account number, if any Last 4 numbers only | iii. Total amoun still owed |
| (a) | | \$ |
| (b) | | \$ |
| (c) | | \$ |
| (d) | | \$ |
| | | |
| 1 | Awarded to Respondent, Other Explain ditional real estate Check this box if you are attachinging title to real estate is a complicate will be changing title to real estate, you not debts one There are no debts. I have listed all the debts I know Attach additional sheets if necess Petitioner will pay the following it. Business or person to who a debt is owed (a) | ditional real estate Check this box if you are attaching separate sheets for additional parcels of anging title to real estate is a complicated and important step in the divorce process. Ou will be changing title to real estate, you should talk to an attorney. In of debts There are no debts. I have listed all the debts I know about and ask that they be divided a Attach additional sheets if necessary. Petitioner will pay the following debts: i. Business or person to whom a debt is owed (a) |

Rule 17.200-Form 227: Request for Relief in a Dissolution of Marriage with Children, continued

b. Respondent will pay the following debts:

| i. Business or person to whom a debt is owed | ii. Account number, if any Last 4 numbers only | iii. Total amount still owed |
|--|--|---------------------------------|
| (a) | | \$ |
| (b) | | \$ |
| (c) | | \$ |
| (d) | | \$ |
| (e) | | \$ |

☐ Check this box if you are attaching a separate sheet listing additional information about Respondent's debts. c. For any debt we do not know about, the spouse who made the debt will pay that debt. You may want to close any credit cards and joint bank accounts in the names of both spouses. Closing accounts may limit the funds a former spouse has access to and may limit your liability for your former spouse's debts. Cash payment I ask that Check one Neither Petitioner nor Respondent pay any money to the other. Petitioner pay Respondent \$ ______ to equalize the division of property and debts by \overline{Day} , 20 \overline{Year} to equalize the division of property Respondent pay Petitioner \$ ____ and debts by Month M. Spousal support (alimony) Check one I ask that (1) Neither Petitioner nor Respondent pay spousal support (alimony) to the other. Spousal support (alimony) be paid as follows: N. Name change Check one I ask that my last name (1) () Not be changed. Be changed to: Name can only be changed to Print your former or birth name name on birth certificate or name used immediately prior to the marriage.

3.

December 2013

Page 7 of 8

Rule 17.200—Form 227: Request for Relief in a Dissolution of Marriage with Children, continued

| Ο. | Court fees |
|-----|---|
| | Check one |
| | I ask that |
| | (1) Petitioner will pay all court fees. |
| | (2) Respondent will pay all court fees. |
| | (3) O Petitioner and Respondent shall each pay one-half of the remaining court fees. |
| | (4) Petitioner and Respondent shall each pay one-half of the total court fees. |
| P. | Attorney's fees |
| | Check one |
| | (1) I have no attorney's fees. |
| | (2) Nill pay my own attorney's fees. |
| | (3) I ask that my spouse pay me \$ for attorney's fees. |
| Q. | Necessary documents |
| | I ask that the court require each of us to sign and deliver to each other any papers that may be needed to carry out the terms of the Decree. |
| R. | Other request for relief |
| | |
| | |
| | |
| | |
| | ☐ Check this box if you have attached a separate sheet listing additional requests for relief. |
| Sta | atements of Understanding and Fact |
| Che | eck all that apply |
| A. | ☐ I have made a full disclosure of my property and debts to the court. |
| B. | ☐ This request for relief addresses all issues in my divorce. |
| C. | ☐ I want the court to approve this request for relief and make it part of the final Decree. |
| | |
| | |
| | |

Rule 17.200—Form 227

Continued on next page

 $Rule\ 17.200-Form\ 227: \textit{Request for Relief in a Dissolution of Marriage with Children}, continued$

| 4. | I. Attorney Help | | | | | | | |
|-----|---|---|--------------------------|------------------------|--|--|--|--|
| | Check one | | | | | | | |
| | A. An attorney did not help me prepare or fill in this paper. | | | | | | | |
| | | B. O An attorney helped me prepare or fill in this paper. | | | | | | |
| | If you check B, you must fill in the following | information: | | | | | | |
| | Name of attorney or organization if any | Attomani'a D | I.N. # - Ask the attori | | | | | |
| | Name of attorney or organization, if any | Allorney S.P. | i.N. # – Ask ine auon | iey | | | | |
| | Business address of attorney or organization | n City | State | ZIP code | | | | |
| | () (| | | | | | | |
| | Attorney's phone number Attorney's | fax number – option | Attorney's ema | il address – optional | | | | |
| | Section 5 to be completed only if filing in paper or if This document, if filed electronically will automatica 1 | lly be served on reg | gistered parties. | . 20 | | | | |
| | I,, ce | $\frac{1}{Mo}$ | nth Day | \overline{Y} | | | | |
| | I mailed or gave a copy of this Request to th | ne other party or | the other party's | attorney at this | | | | |
| | address: | | | | | | | |
| | | | | | | | | |
| | Name of person to whom I delivered or mailed it | | | | | | | |
| | | w | | | | | | |
| | Party's or attorney's mailing address | City | State | ZIP code | | | | |
| 6. | 6. Oath and Signature | | | | | | | |
| | I. ha | ave read this Re | equest, and I certif | v under penaltv | | | | |
| | Print your name | | . 4 | , | | | | |
| | of perjury and pursuant to the laws of the St | ate of lowa that | the information I I | nave provided | | | | |
| | in this Request is true and correct. | | | | | | | |
| | Signed on: Month Day Year | Your signatur | ** | | | | | |
| | Signed on. Month Day Tear | 10ur signatur | e | | | | | |
| | Mailing address | City | State | ZIP code | | | | |
| | () | | | | | | | |
| | Phone number Email address | | Additional email addi | ess, if applicable | | | | |
| | * Whether filing electronically or in paper, you must hand scan the form after signing it and then file electronically | | on this form. If you are | filing electronically, | | | | |
| | | | | | | | | |
| | | | | | | | | |
| _ | 2 : -2 | 200 5 207 | | D 0 10 | | | | |
| Dec | December 2013 Rule 17. | 200—Form 227 | | Page 8 of 8 | | | | |

Rule 17.200—Form 228 Settlement Agreement for a Dissolution of Marriage with Children

Use this form only if you and your spouse both agree to the terms of a Settlement Agreement.

Do not use this form if:

- You and your spouse have no children under the age of 18.
- You and your spouse have no children 18 years of age or older who still need support.
- There are no children under age 18 who were adopted or born during this marriage.

Caution: This form may require you to provide protected or sensitive information.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (211) if you have not already done so.
- [a] If filing in paper, you may use form 211 to provide any protected information in full.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| | In the Iowa District Court fo | r County where your c | case is filed | County |
|-----------------|--|--|------------------------------------|--------------------|
| Jpoi | n the Petition of | Equity case n | 10 | |
| etit | ioner Full name: first, middle, last | | ement Agreen n of Marriage | |
| nd c | oncerning | | | |
| esr | | | | |
| Pe | rsonal Information Fill in all in lyou fear for your safety, you may leave Petitioner's birth year and prese | your address, phone number nt residence: | | ulted by your spou |
| Pe | rsonal Information Fill in all in I you fear for your safety, you may leave | your address, phone number | | ulted by your spou |
| Pe | rsonal Information Fill in all in ly ou fear for your safety, you may leave Petitioner's birth year and prese | your address, phone number nt residence: Birth year | ; and email blank. | ZIP code |
| Pe and A. | rsonal Information Fill in all | your address, phone number nt residence: Birth year City Phone number | ; and email blank. State Email a | ZIP code |
| Pe and A. | rsonal Information Fill in all in all in all you fear for your safety, you may leave Petitioner's birth year and prese Petitioner's present street address County | your address, phone number nt residence: Birth year City Phone number sent residence: | ; and email blank. State Email a | ZIP code |

2. Agreements

We agree to the following:

Rule 17.200—Form 228: Settlement Agreement for a Dissolution of Marriage with Children, continued

| Α. | A. Children Check all that are true | | | |
|----|--|--|--|--|
| | (1) We agree to the custody and visitation set out in the Agreed Parenting Plan (229). | | | |
| | (2) We do not agree about custody and visitation. We each filed a Proposed Parenting Plan (230). A parenting plan, either form 229 or form 230, must be provided to the court with the Settlement Agreement. | | | |
| | (3) Petitioner has taken the children in the middle course. Attach certificate. | | | |
| | (4) Respondent has taken the children in the middle course. Attach certificate. | | | |
| B. | Breakdown of marriage The marriage is broken down and cannot be saved. | | | |
| C. | Counseling will not save the marriage. | | | |
| D. | Waiting period before decree Check all that apply | | | |
| | (1) O More than 90 days have passed since Respondent accepted service or was served with an Original Notice. | | | |
| | (2) Fewer than 90 days have passed since Respondent accepted service or was served with an Original Notice, but we want the court to take action right away without a separate hearing because: | | | |
| | This paper explains how we would like to settle all issues in our divorce. | | | |
| E. | Financial affidavits Check one | | | |
| | (1) Petitioner or Respondent has filed a Financial Affidavit (224). | | | |
| | If you check (1), check each that is applicable. | | | |
| | a. | | | |
| | b. Respondent has filed a Financial Affidavit. Respondent certifies that Respondent | | | |
| | has fully disclosed all income and the identity and value of all assets and debts. | | | |
| | (2) We are asking that the court not require us to file Financial Affidavits because: | | | |
| | | | | |
| F. | Child Support Check all that are true Note: The amount of child support is determined using the lowa Child Support Guidelines. The lowa Department of Human Service provides a child support estimator on its website. Go to: https://childsupport.ia.gov/ . | | | |
| | (1) Petitioner shall pay child support to Respondent in the amount of \$ per month. | | | |
| | (2) Petitioner shall pay child support to a third party in the amount of \$ per month. | | | |
| | | | | |

 $\textbf{Rule 17.200} \\ \textbf{—Form 228: } \textit{Settlement Agreement for a Dissolution of Marriage with Children}, \textbf{continued}$

| | Third party's full name: first, middle, last | | last | | | | | |
|----|--|--|--------------------|---------------------|--------------------------------------|-----------------|---------------|--------------|
| | | Present street addre | SS | City | | State | ZIP code | ! |
| | | County | | | | | | |
| | (3) | ☐ Respondent shall p | ay child suppo | ort to Petitio | oner in the amount | of \$ | pe | r month. |
| | (4) Respondent shall pay child support to | | ort to a thire | d party in the amou | nt of \$ | pe | r month. | |
| | | Third party's full nam | ne: first, middle, | last | | | | |
| | | Present street addre | ess | City | | State | ZIP code | <u> </u> |
| | | County | | _ | | | | |
| | (5) | Child support payment | ts shall begin | on the | day of | | | 20 |
| | | for the following childre | _ | | <u>Mon</u> | nth | · | Year |
| | | First, middle, & last initials of each child | Birth | year | First, middle initials of ea | | Birt | h year |
| | | a. | | | d. | | | |
| | | b. | | | e. | | | |
| | | c. | | | f. | | | |
| | | Check this box if you | u are attaching | a separate | sheet listing addition | nal children. | | |
| | (6) | ☐ Check here if you Guidelines amoun | | • | - | | | |
| | | a. Amount reque | | | | ина ехриин | wny in o. | |
| | | • | | | the Guidelines an | nount becaus | se: | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| G. | Tax | exemption | | | | | | |
| | (1) | I ask the court to set th | ne tax deducti | on as: | | Check o | ne for eac | h child |
| | | First, middle, & last initials of each child | Birth year | | no should now claid tax deduction | m Every Year | Even Years | Odd Years |
| | | a. | | | | O | 0 | 0 |
| | | b. | | | | | 0 | 0 |
| | | C. | | | | O | O | 0 |
| | | | | | | • | | |

 $Rule\ 17.200 — Form\ 228:\ \textit{Settlement Agreement for a Dissolution of Marriage with Children}, continued$

| | | d. | | | | | | | | 0 | 0 | 0 |
|----|--------------|---------------|----------------------------------|-----------------------|---|----------------------------------|--------------------------|--|-------------|--------------|------------|----------------|
| | | e. | | | | | | | | 0 | 0 | \overline{O} |
| | | f. | | | | -2 | | | | Ô | Ô | Ō |
| | | | Check this b | ox if you | u are attaching | a separ | rate sheet | listing add | ditional c | children. | | |
| | 9 | Tax The | forms are avail earned income | able fron tax cred | ody must sign IR n the IRS website dit is not the sam | e: <u>http://w</u> e as the t | ww.irs.gov ax exempti | <u>.</u> | stodial pa | rent can ta | ke the ded | uction. |
| | (2) | The | e deduction v | will star | t in tax year _ I | ear | | | | | | |
| Н. | | | care exper | | health care | expen | ises as f | follows: | Check a | ll that app | ply | |
| | Petit | ione | er Responde | ent | | | | | | | | |
| | (1) (| \bigcup | O | - 1 | ovide medica | 10.0 | 0.50 | | 50 | | | |
| | (2) (| O | 0 | the ch | | | | of uncovered medical expenses for until spent, then uncovered medical expenses | | | | |
| | | | | | % by F | etitione | er and | | _% by R | esponde | nt. | |
| | (3) | \supset | 0 | shall p | oay cash med | lical sup | port in th | he amour | nt of \$ | | per | month. |
| I. | Divi Chec | | n of person | al pro | perty | | | | | | | |
| | (1) (| _ | Petitioner's possession | posses | our personal p ssion. Respo | | | | | | | |
| | (O) 1 | $\overline{}$ | If you check | - | | r | | | | | | |
| | (2) | | | | erty has not b neets if necessa | | naea, bu | it we agre | e it wiii i | be divide | d as folio | ows. |
| | 0 | a. | Petitioner w | /ill get t | the following | as Petit | ioner's s | eparate p | ersonal | property | : | |
| | | | | | | | | | | | | |
| | | b. | Responden | it will ge | et the followir | ig as Re | espondei | nt's separ | rate pers | sonal pro | perty: | |
| | | | person's retire | ment ac | counts and per count or pension ROs are complica | , a separa | ate order ca | alled a Qual | lified Dom | estic Relati | ions Order | |

 $Rule\ 17.200 — Form\ 228:\ \textit{Settlement Agreement for a Dissolution of Marriage with Children}, continued$

| J. | I. Division of real estate For each parcel of real estate you own, provide the following information. Attach a separate sheet for each additional parcel. | | | | | | |
|----|---|--------|--|--|---------------------------------|--|--|
| | (1) | | nership of real estate ck one | | | | |
| | | a. | We do not own any real estate. If yo | | | | |
| | | b. (| We own real estate located at: | t address | | | |
| | | | in the City of | , County of | , and | | |
| | | | State of This follows: | land is described in the dee | d or contract as | | |
| | | | | | | | |
| | (2) | | real estate shall be: | | | | |
| | | a. (| Sold and the profit or debt divided to Respondent. | | % | | |
| | | b. (| Awarded to Petitioner, subject to all | iens and mortgages. | | | |
| | | C. | Awarded to Respondent, subject to a | all liens and mortgages. | | | |
| | | d. (| Other Explain | | | | |
| | (3) | Add | itional real estate | | | | |
| | | | Check this box if you are attaching separate | sheets for additional parcels of | real estate. | | |
| | | | : Changing title to real estate is a complicated and u will be changing title to real estate, you should tall | | SS. | | |
| Κ. | Div | /isior | n of debts | | | | |
| | | _ | l that apply | | | | |
| | (1) O There are no debts. | | | | | | |
| | (2) | ~ | We have listed all the debts that we know Attach additional sheets if necessary. | w about and ask that they be | divided as follows: | | |
| | | a. | Petitioner will pay the following debts: | | | | |
| | | | i. Business or person to whom a debt is owed | ii. Account number, if any Last 4 numbers only | iii. Total amount still owed | | |
| | | | (a) | | \$ | | |

(b)

\$

Rule 17.200—Form 228: Settlement Agreement for a Dissolution of Marriage with Children, continued

| (c) | \$ |
|-----|----|
| (d) | \$ |
| (e) | \$ |

- ☐ Check this box if you are attaching a separate sheet listing additional information about Petitioner's debts.
- b. Respondent will pay the following debts:

| i. Business or person to whom a debt is owed | ii. Account number, if any Last 4 numbers only | iii. Total amount still owed |
|--|--|---------------------------------|
| (a) | | \$ |
| (b) | | \$ |
| (c) | | \$ |
| (d) | | \$ |
| (e) | | \$ |

- ☐ Check this box if you are attaching a separate sheet listing additional information about Respondent's debts.
- c. For any debt we do not know about, the spouse who made the debt will pay that debt.

Note: You may want to close any credit cards and joint bank accounts in the names of both spouses. Closing accounts may limit the funds a former spouse has access to and may limit your liability for your former spouse's debts.

L. Cash payment

We ask that Check one

| (1) |) Neither Peti | tioner nor Res | pondent pay a | any money to | the other. |
|-----|-----------------------|----------------|---------------|--------------|------------|
|-----|-----------------------|----------------|---------------|--------------|------------|

| (2) O Petitioner pay and debts by | Respondent \$ | | to equalize the division of property |
|--------------------------------------|---------------|-----|--------------------------------------|
| , | Month | Day | _, 20 <u>Year</u> |

| (3) | Respondent pay Petitioner \$ | | _ to equalize the division of property |
|-----|------------------------------|-------|--|
| _ | and debts by | | |
| | | , 20_ | |
| | Month | Day Y | ^T ear |

Continued on next page

 $\textbf{Rule 17.200} \\ \textbf{—Form 228: } \textit{Settlement Agreement for a Dissolution of Marriage with Children}, \textbf{continued}$

| Μ. | Spousal support (alimony) Check one We ask that: | | | | | |
|-----|--|---|--|--|--|--|
| | | | | | | |
| | (1) Neither Petitioner nor Respondent pay spo | usal support (alimony) to the other. | | | | |
| | (2) Petitioner pay spousal support (alimony) to | Respondent as follows: | | | | |
| | | | | | | |
| | (3) Respondent pay spousal support (alimony) to Petitioner as follows: | | | | | |
| NI | Name change | | | | | |
| IN. | Name change Check one | | | | | |
| | We ask that | | | | | |
| | (1) Petitioner's name | | | | | |
| | | | | | | |
| | × | None and the demands | | | | |
| | b. O Be changed to: | Name can only be changed to name on birth certificate or name used immediately prior to the marriage. | | | | |
| | Print Petitioner's former or birth name | immediately prior to the marriage. | | | | |
| | (2) Respondent's name | | | | | |
| | a. Not be changed. | | | | | |
| | b. O Be changed to: | Name can only be changed to name on birth certificate or name used | | | | |
| | | immediately prior to the marriage. | | | | |
| | Print Respondent's former or birth name | | | | | |
| Ο. | Court fees | | | | | |
| | Check one | | | | | |
| | We ask that | | | | | |
| | (1) O Petitioner will pay all court fees. | | | | | |
| | (2) Respondent will pay all court fees. | | | | | |
| | (3) Petitioner and Respondent shall each pay one-half of the remaining court fees. | | | | | |
| | (4) Petitioner and Respondent shall each pay | one-half of the total court fees. | | | | |
| P. | Attorney's fees | | | | | |
| | (1) Petitioner's attorney's fees | | | | | |
| | Check one | | | | | |
| | a. Petitioner has no attorney's fees. | | | | | |
| | b. Petitioner will pay Petitioner's attorney | s fees. | | | | |
| | c. Respondent will pay \$ | for Petitioner's attorney's fees. | | | | |

 $Rule\ 17.200 — Form\ 228:\ \textit{Settlement Agreement for a Dissolution of Marriage with Children}, continued$

| | \succeq | orney's fees ent has no attorney's fees. ent will pay Respondent's a | attorney's fees. |
|----|--|--|--|
| | c. O Petitioner | will pay \$ | for Respondent's attorney's fees. |
| Q. | Necessary docume We will sign and prom Settlement Agreemen | ptly deliver to each other a | ny papers that may be needed to carry out this |
| R. | Other agreements Attach additional sheets | | |

Continued on next page

4.

Rule 17.200—Form 228: Settlement Agreement for a Dissolution of Marriage with Children, continued

| 3. | | torney He | elp | | | | | | | | | |
|----|--|-----------------------------|---|------------------|--|---|---------------------------|-------------|------------------------|--|--|--|
| | | Petitioner | | | | | | | | | | |
| | | (1) (An | attorney | did not help | p me prepare or | fill in this paper. | | | | | | |
| | | $\overline{\mathbf{v}}$ | | | | | | | | | | |
| | | | (2) An attorney helped me prepare or fill in this paper. If you check (2), you must fill in the following information: | | | | | | | | | |
| | | Name o | of attorney | or organiza | tion, if any | Attorney's P.I.I | V. # – Ask | the attori | пеу | | | |
| | | Busines | ss address | of attorney o | or organization | City | | State | ZIP code | | | |
| | | (| <u></u> , | , | _ (). | , | | | ., ,, | | | |
| | R | Responde | y's phone | number | Attorney's fax | c number – optional | Attori | ney s ema | til address – optional | | | |
| | υ. | _ | | did not beli | n me nrenare or | fill in this paper. | | | | | | |
| | | \sim | - | | | | | | | | | |
| | | | (2) An attorney helped me prepare or fill in this paper. If you check (2), you must fill in the following information: | | | | | | | | | |
| | | Name of attorney or organiz | | or organiza | tion, if any | Attorney's P.I.1 | Attorney's P.I.N. # – Ask | | k the attorney | | | |
| | | Busines | ss address | of attorney of | or organization | City | | State | ZIP code | | | |
| | | (|) | | () | | | | | | | |
| | | Attorne | y's phone | number | Attorney's fax | c number – optional | Attor | ney 's ema | il address – optional | | | |
| 1 | 0 | aths and S | Sianatuu | 70 C | | | | | | | | |
| ᅻ. | | | _ | | ses all issues in | our divorce W | e have m | ade a ful | disclosure of | | | |
| | This Settlement Agreement addresses all issues in our divorce. We have made a full disclosure of our property and debts to each other. We want the court to approve this Agreement and make it a | | | | | | | | | | | |
| | pai | rt of the final | | | | | | | | | | |
| | Α. | Petitioner's | Oath and | d Signature | 9 | | | | | | | |
| | | l, Print vous | r manna | | , certify | under penalty of | perjury an | d pursuar | nt to the | | | |
| | | • | | va that I hav | e read this Settle | ment Agreement a | and it accu | ratelv stat | es how I would | | | |
| | | like the cour | t to addres | s the issues | s in my divorce. I | know I have the ri | ght to talk | to an atto | rney about this | | | |
| | | | | | ng this Agreement and filing with the | . I am asking that court. | this Settle | ment Agr | eement be | | | |
| | | | | | , 20 | _ | | | | | | |
| | | Month | | Day | Year | Petitioner's sig | nature* | | | | | |
| | | Mailing address | | City | City | | State | ZIP code | | | | |
| | | () | 1 | | | | | | | | | |
| | | Phone numb | ber | | Email address | | Additiona | l email ac | ldress – if available | | | |
| | | | _ | | paper, you must han gigning it and then f | dwrite your signatu ìle electronically | ire on this f | orm. If you | ı are filing | | | |
| | | orcen ornet | y, some m | c joins agreer s | | l on next page | | | | | | |

 ${\it Rule~17.200--Form~228:~Settlement~Agreement~for~a~Dissolution~of~Marriage~with~Children,} continued$

| Respondent's Oath and Signature | | | | | | | |
|--|-----|--------------|---------|-----------------|-----------------|-------------|-----------------------|
| l, Print your name | | ., | certify | under penalty o | of perjury ar | nd pursuar | nt to the |
| laws of the State of lowa that I have read this Settlement Agreement and it accurately states how I would like the court to address the issues in my divorce. I know I have the right to talk to an attorney about this Agreement. I am voluntarily signing this Agreement. I am asking that this Settlement Agreement be presented to a judge for approval and filing with the court. | | | | | rney about this | | |
| Month | Day | , 20 Year | _ | Respondent's | signature* | | |
| Mailing address | | | City | | | State | ZIP code |
| () Phone number | | Email addre | SS | | Additiona | al email ac | ddress – if available |
| * Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically. | | | | | | | |

Rule 17.200—Form 229: Agreed Parenting Plan

 $Use \ this \ form \ if \ both \ spouses \ agree \ to \ everything \ in \ the \ plan \ regarding \ child \ custody \ and \ visitation.$

Do not use this form if you and your spouse **do not** agree to all child custody and visitation arrangements. Instead, use form 230 to present a Proposed Parenting Plan to the court for the child custody and visitation arrangements you want.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| | In the Iowa District | | ounty where yo | here you are filing this Parenting Plan | | | |
|------|---|-----------------|-------------------|--|----------------------|--|--|
| Upo | n the Petition of | | Equ | uity case no. | _ | | |
| Peti | tioner Full name: first, middle | , last | | Agreed Parenting | Plan | | |
| and | concerning | | | | | | |
| Res | pondent Full name: first, n | niddle, last | | | | | |
| | nformation for the Co | | | | | | |
| E | 3. Children List all childre | en born to or a | dopted by Petii | toner and Respondent. | | | |
| | First, middle, & last initials of each child | Present age | Gender M F | School | Grade | | |
| | (1) | | 00 | | | | |
| | (2) | | 0 | | | | |
| | (3) | | 0 | | | | |
| | (4) | | 00 | | | | |
| | (5) | | 00 | | | | |
| | (6) | | 00 | | | | |
| | ☐ Check this box if you | are attaching | a sheet listing a | dditional children. | • | | |
| C | C. Information about the Check all that are true | children | | | | | |
| | (1) The children lis | ted in B are t | he only childre | n born to or adopted by these | e parents. | | |
| | | | | court case. If you check (2), a ld custody and visitation. | attach a copy of the | | |

Continued on next page

Rule 17.200-Form 229: Agreed Parenting Plan, continued

- (3) There are children of Petitioner or Respondent not listed in B. Explain
 - If there are children born before the marriage, who are not the children of Petitioner or of Respondent, check (3) and explain.
 - If there are children of Petitioner and Respondent, but the parental rights have been terminated, check (3) and explain.

2. Plan

- A. Read these definitions of legal custody and physical care:
 - (1) Legal custody means a parent has legal rights and responsibilities for the child.

| | These include making decisions about medical care, education, extracurricular activities, and religious instruction. |
|----|--|
| | (2) Joint legal custody means both parents have equal legal rights and responsibilities for the child. These include making decisions about medical care, education, extracurricular activities, and religious instruction. |
| | (3) Physical care means providing the main home for the child and taking care of the child. |
| | (4) Joint physical care means both parents have equal rights and responsibilities for providing the main home for the child and taking care of the child. |
| B. | Legal custody should be |
| | Check one |
| | (1) O Joint legal custody to both parents |
| | (2) O To Petitioner |
| | (3) To Respondent |
| | (4) To other person |
| | Full name of other person: first, middle, last |
| C. | Physical care should be |
| | Check one |
| | (1) \bigcirc To Petitioner If you check (1), use D for Respondent's visitation. |
| | (2) \bigcap To Respondent If you check (2), use D for Petitioner's visitation. |
| | (3) Joint physical care to both parents If you check (3), use D(12) to explain the joint physical care schedule. |
| | (4) O To other person |
| | Full name of other person: first, middle, last |
| D. | Visitation |
| | Use D only if one parent will have physical care. This is the schedule for the other parent to see the children. |
| | (1) Visitation for |
| | Check one |
| | a. O Petitioner |
| | b. O Respondent |

Rule 17.200-Form 229: Agreed Parenting Plan, continued

| a. | 0 | | e allowed becau | use: | | | |
|----|----------------|--|---|--|--|--|---|
| | | | | | | | |
| b. | 0 | Visitation should be su | pervised becau | se: | | | |
| | | | | | | | |
| | | The supervisor for visit | ation should be | Supervisor': | s full name : fir | rst, middle, la: | st |
| C. | | | ed visitation so | hedule as t | he parents a | gree: | |
| | i. ii. | | | | _Ba.m. _p.m. to | 8 | a.m. p.m. |
| | iii. | Every weekend From Day of week | at | გ | p.m. to | atat_ | a.m. Time |
| | iv. | Every other weeke | end at | | a.m. p.m. to | at | ☐ a.m. ☐ p.m. |
| | ٧. | ☐ Other Describe | 111 | ne | Day o | j week . | Time |
| | vi. | | | | | , 20 | |
| De | etaile | | | | Day | Year | |
| No | te: Yo | ou do not have to fill in eve | rything. Any day t | | c means the chi | ldren will spend | |
| Г | olida | | Tim | | P = Petit | Even years | Respondent Odd years |
| | | | | O a.m. | P R | P R | P R |
| | | | | O p.m. | | \ | 188 |
| | | · · · · · · · · · · · · · · · · · · · | : | O p.m. O a.m. O p.m. | ŏŏ | 00 | 100 |
| | Ch a. b. C. C. | c. Check a, a. Check a, a. Check a, a. Check a, a. Check a, b. Check a, ii. iii. iv. v. vi. Detaile Note: Yo parent wh Holida New Yo New Yo | The supervisor for visit C. Regular unsupervise Check all that apply i. Reasonable visitatio M Tu W III. Every weekend From Day of week iv. Every other weeke From Day of week V. Other Describe vi. Visitation will start on A Detailed holiday schedule This schedule tells on which holiday Note: You do not have to fill in eve | Check a, b, or c. a. Visitation should not be allowed because | Check a, b, or c. a. Visitation should not be allowed because: Description | Check a, b, or c. a. Visitation should not be allowed because: The supervisor for visitation should be Supervisor's full name: fit or Note: You do not have to fill in everything. Any day that is left blank means the children on that day. Time Supervisor for visitation on the education of the every year property in the supervisor of the supervisor's full name: fit or Note: You do not have to fill in everything. Any day that is left blank means the children on that day. Time Supervisor's full name: fit or Note: You do not have to fill in everything. Any day that is left blank means the children on that day. Time Supervisor's full name: fit or Note: You do not have to fill in everything. Any day that is left blank means the children on that day. Time Supervisor's full name: fit or Note: You do not have to fill in everything. Any day that is left blank means the children on that day. P = Petit Holiday Time Supervisor's full name: fit or Note: You do not have to fill in everything. Any day that is left blank means the children on that day. P = Petit Open Supervisor's full name: fit or Note: You do not have to fill in everything. Any day that is left blank means the children on that day. P = Petit Open Supervisor Super | Check a, b, or c. a. Visitation should not be allowed because: The supervisor for visitation should be Supervisor's full name: first, middle, last Supervisor's full name: first, middle, last Check all that apply i. Reasonable visitation as the parents agree. ii. Mid-week visitation on these days: M Tu W Th F From Da.m. to Day of week iii. Every weekend A Time Day of week iv. Every other weekend A Time Day of week v. Other Describe vi. Visitation will start on Month Day of week vi. Visitation will start on Month Day of week Time Day of week vi. Visitation will start on Month Day of week Time Detailed holiday schedule This schedule tells on which holidays the children will be with either Petitioner or Respondent. Note: You do not have to fill in everything. Any day that is left blank means the children will spend parent who already has the children on that day. P = Petitioner R= Holiday Time Every year Even years P R New Year's Day : Q a.m. Q Q Q a.m. New Year's Day : Q a.m. Q Q Q a.m. Martin Luther King, Jr. Day 2 Q a.m. Martin Luther King, Jr. Day 2 Q a.m. Martin Luther King, Jr. Day 2 Q a.m. |

Rule 17.200-Form 229: Agreed Parenting Plan, continued

| President's Day | : | a.m. p.m. | 00 | 00 | 00 |
|-----------------------------|---|----------------|----|----|----|
| Memorial Day | : | a.m. p.m. | 00 | 00 | 0 |
| Independence Day July 4th | : | a.m. p.m. | 00 | 0 | 0 |
| Labor Day | : | O a.m. p.m. | 0 | 0 | 0 |
| Veterans' Day November 11th | : | O a.m. p.m. | 0 | 0 | 0 |
| Thanksgiving Day | : | O a.m. p.m. | 0 | 0 | 0 |
| Christmas Eve | : | a.m. p.m. | 00 | 0 | 0 |
| Christmas Day | : | a.m. p.m. | 00 | 00 | 0 |
| Mother's Day | : | O a.m. p.m. | 00 | 0 | 0 |
| Father's Day | : | O a.m. | 00 | 0 | 0 |
| Petitioner's Birthday | : | a.m. p.m. | 00 | 0 | 0 |
| Respondent's Birthday | : | Q a.m. p.m. | 0 | 0 | 0 |
| Halloween October 31st | : | a.m. p.m. | 00 | 00 | 0 |
| Other: Describe | : | O a.m. p.m. | 00 | 00 | 00 |
| Other: Describe | : | a.m. p.m. | 00 | 00 | 00 |

(4) Special rules for holidays

| -1 | | · · · · · · · · · · · · · · · · · · · |
|----|------------|---|
| Cł | neck o | ne |
| a. | 0 | If a holiday falls on a Friday or a Monday, the parent with the holiday will have the whole weekend. |
| b. | 0 | If a holiday falls on a Monday or a Friday, the alternating weekend schedule in D(2)c.iv. will continue. This means the parent who has the children on the holiday weekend may have the children two weekends in a row. |
| C. | 0 | The parents will cooperate and rearrange the alternate weekend schedule so that neither parent will have the children more weekends in a row without contact with the other parent. |
| d. | \bigcirc | |

Continued on next page

Rule 17.200—Form 229: Agreed Parenting Plan, continued

(5) Summer

| Check one |
|--|
| a. O Summer school vacation will be divided as Petitioner and Respondent agree. |
| b. Petitioner and Respondent will each have one-half of the summer school vacation with alternate weekends to the other parent. The children will be returned to the parent with physical care at least one week before school starts. |
| c. The parent without physical care will have two weeks of uninterrupted summer visitation with the children and the parent with physical care will have two weeks of uninterrupted summer visitation with the children. During the rest of the summer the weekly visitation schedule should be followed. |
| d. Other Explain |
| (6) Winter school holiday Check one a. Winter school holidays will be divided as Petitioner and Respondent agree. b. Petitioner and Respondent will each have one-half of the winter school holiday and alternate the first and second half each year. |
| c. Other Explain |
| (7) Spring school break Check one a. Spring school break will be divided as Petitioner and Respondent agree. b. Spring school break will be alternated every other year between Petitioner and Respondent. c. Petitioner and Respondent will each have one-half of each spring school break. d. Other Explain |
| |
| (8) The children's birthdays Check one a. Petitioner and Respondent will have contact with the children on their birthdays as the parents may agree. |
| b. A child's birthday will be spent with the parent who has the child on that day. |
| c. Each child's birthday will be alternated from year to year between Petitioner and Respondent. |
| d. Petitioner and Respondent will each have no less than two hours of personal contact with the child on the child's birthday. |
| e. Other Explain |

Rule 17.200—Form 229: Agreed Parenting Plan, continued

| (9) Pick up and drop off |
|--|
| Check all that apply |
| a. The parents will agree about pick up and drop off for each visit. |
| b. The parent with visitation will pick up the children at the other parent's residence at the beginning of visitation and the parent with physical care will pick up the children at the end of visitation. |
| c. Only certain people can help the parents with transportation. If persons other than Petitioner and Respondent will help them provide transportation of the children, only the following persons are permitted to help: |
| d. Other arrangements for visitation For example, Petitioner and Respondent will meet at a location between their residences. Explain |
| (10) The parent without the children may contact the children by Check all that apply a. Calling the children Check one i. At reasonable hours ii. Any day from Phone number Phone number where children can be contacted b. Email where children can be contacted c. Other Explain |
| (11) Changes to the schedule Check all that apply a. The parties may agree to additional visitation or changes to the schedule. b. If one parent fails to arrive at the appointed time, then the other parent will wait for at least minutes before cancelling the visit. c. No changes allowed except by a court order. d. Other Explain |
| Continued on next page |

December 2013

Rule 17.200-Form 229: Agreed Parenting Plan, continued

(12) Joint physical care plan

Use only if both Petitioner and Respondent are given joint physical care.

a. How Petitioner and Respondent will make decisions about the children: For example, decisions on school, medical care, religion, and other decisions parents make for their children. b. How the children's time will be divided between Petitioner and Respondent: You may use sections 3, 4, 5, 6, 7, and 8 for holidays, school breaks, and birthdays. c. How the children's expenses will be paid: For example, expenses such as clothes, activities, and school fees. ___ d. How Petitioner and Respondent will deal with major changes or disagreements about the children (including changes due to the children's age and development): Other issues: (13) Resolving disagreements Check one Before going to court to resolve disagreements, Petitioner and Respondent will Ask the following person to help them resolve disagreements: Relationship to parties Phone number Name ZIP code Present street address City State Go to mediation. Do not check if mediation will not work because of domestic violence or an injunction. Continued on next page

Page 7 of 9

Rule 17.200-Form 229

3.

4.

Rule 17.200—Form 229: Agreed Parenting Plan, continued

| | torney Help | | | | | | | | |
|----|--|-------------------------------------|--|---|-------------------------|----------------------|--|--|--|
| A. | Petitioner | | | | | | | | |
| | (1) An attorney did not help me prepare or fill in this paper. | | | | | | | | |
| | \simeq | - | orepare or fill i | | | | | | |
| | | (2), you must | fill in the follow | ving information: | | | | | |
| | 77 | | | - 1.5717 | // 4 * * * · · · | | | | |
| | Name of attorney | or organizati | on, if any | Attorney's P.I.N. | # - Ask the attorn | iey | | | |
| | Business address | of attorney o | r organization | City | State | ZIP code | | | |
| | () | | () | | _ | | | | |
| | Attorney's phone | number | Attorney's fa | x number – optional | Attorney's ema | il address – optiona | | | |
| B. | Respondent | | | | | | | | |
| | (1) An attorney | did not help | me prepare o | r fill in this paper. | | | | | |
| | | | orepare or fill in | n this paper. ving information: | | | | | |
| | 1) уой спеск (| (2), you musi | jiii in ine joiion | ing injormation. | | | | | |
| | Name of attorney | or organizat | ion, if any | Attorney 's P.I.N. | # - Ask the attorn | пеу | | | |
| | | | | _ | | _ | | | |
| | Business address | of attorney o | r organization | City | State | ZIP code | | | |
| | ()_ Attorney's phone | | | x number – optional | 4440,000,000,000 | :1 | | | |
| | Attorney's phone | numoer | Allorney S Ja | x number – optional | Allorney's ema | 11 aaaress – optiona | | | |
| Oa | iths and Signatu | res | | | | | | | |
| | s Agreed Parenting F | | - | | | . We want the | | | |
| | urt to approve this Agi | | ing Plan and m | nake it a part of the | e final Decree. | | | | |
| Α. | Petitioner's Oath and | d Signature | | | | | | | |
| | I, Print Petitioner's no | ате | , certif | y under penalty of p | erjury and pursuan | t to the | | | |
| | laws of the State of lov | | read this Agree | ed Parenting Plan, a | nd I agree with the | Plan. I ask the | | | |
| | court to adopt this Agr | eed Parenting | g Plan. | | | | | | |
| | 1.6d. | - - | , 20 <u> </u> | David an arte at an | | | | | |
| | Month | Day | Year | Petitioner's sign | ature" | | | | |
| | 16:1: | | | _ | - Gtt | 71D 1- | | | |
| | Mailing address | | City | , | State | ZIP code | | | |
| | () | | | | | | | | |
| | Phone number | | mail address | | dditional email ad | - | | | |
| | * Whether filing electron electronically, scan th | nically or in po e form after si | aper, you must ha oning it and then | ndwrite your signature file electronically | e on this form. If you | ı are filing | | | |
| | ereen onreany, sean m | e jerni agrer er | grang ir unu merr, | , ac creen cracany. | | | | | |
| | | | | | | | | | |
| | | | <i>G</i> | 1 | | | | | |

B.

Rule 17.200-Form 229: Agreed Parenting Plan, continued

| Respondent's Oath | n and Signati | ıre | | | | |
|---|---------------|---------------|----------------|-------------------|-------------|-----------------------|
| l, Print Respondent' | s name | , cert | ify under pena | lty of perjury ar | nd pursual | nt to the |
| laws of the State of lo court to adopt this Ag | | • | ed Parenting F | Plan, and I agre | ee with the | Plan. I ask the |
| | | . 20 | | | | |
| Month | Day | _, 20 <u></u> | Responder | nt's signature* | ı | |
| Mailing address | | Cii | ty | | State | ZIP code |
| () Phone number | | Email address | | Additiona | al email a | ddress – if available |
| * Whether filing electr | | 1 , 5 | | | form. If yo | u are filing |

Rule 17.200—Form 230: Proposed Parenting Plan

Use this form if you and your spouse do not agree to all child custody and visitation arrangements

Do not use this form if both spouses agree to everything in this plan. Instead, use form 229 to tell the court what you both want your plan to be.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| li | n the Iowa District C | | | | | County |
|--------|---|----------------|-----------|----------------|---|--------------------|
| | | C | ounty wh | ere yoı | ı are filing this Parenting Plan | |
| Jpon | the Petition of | | | Equ | ity case no | |
| | | | | | Proposed Parentin | g Plan |
| etiti | Oner Full name: first, middle, i | last | | | | |
| nd co | ncerning | | | | | |
| Respo | ondent Full name: first, mi | ddle, last | | | | |
| am | | | | | | |
| heck o | ne | | | | | |
| Α. | Petitioner | | | | | |
| B. | Respondent | | | | | |
| . Inf | formation for the Co | urt | | | | |
| A. | Children List all children | n born to or a | dopted by | Petiti | oner and Respondent. | |
| | First, middle, & last initials of each child | Present age | Gend M | ler F | School | Grade |
| | (1) | | 0 | $\overline{0}$ | | |
| | (2) | | 0 | 0 | | |
| | (3) | | 0 | 0 | | |
| | (4) | | 0 | 0 | | |
| | (5) | | 0 | 0 | | |
| | (6) | | 0 | 0 | | |
| | ☐ Check this box if you a | re attaching | a separat | e sheet | listing additional children. | |
| B. | Information about the | children | | | | |
| | (1) The children liste | ed in A are t | he only o | hildre | n born to or adopted by these | parents. |
| | | | | | court case. If you check (2), a ld custody and visitation. | ttach a copy of th |
| | (3) There are children | en of Petitior | ner or Re | spond | lent not listed in B. Explain | |
| | If there are change and change are change are change. | | | narria | ge, who are not the children of l | Petitioner or of |
| | певропает, ст | icon (5) una e | лриин | | | |

Rule 17.200-Form 230: Proposed Parenting Plan, continued

• If there are children of Petitioner and Respondent, but the parental rights have been terminated, check (3) and explain.

| C. | Special concerns about the children | | | | | | |
|----|-------------------------------------|---|--|--|--|--|--|
| | Check al | l that are true | | | | | |
| | (1) | Breastfeeding infant | | | | | |
| | (2) | Child with a disability | | | | | |
| | (3) | Other Explain | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| D. | Informa | ation about the parents | | | | | |
| | Check al | l that are true | | | | | |
| | (1) | Petitioner receives public assistance, Title XIX, or FIP. | | | | | |
| | (2) | Respondent receives public assistance, Title XIX, or FIP. | | | | | |
| | (3) | Petitioner plans to move within the next year. | | | | | |
| | (4) | Respondent plans to move within the next year. | | | | | |
| | (5) \bigcirc | This is the Parenting Plan for before the move. | | | | | |
| | (6) | This is the Parenting Plan for after the move. | | | | | |
| E. | Special | concerns about the parents | | | | | |
| | Check al | l that are true | | | | | |
| | (1) | Petitioner has an alcohol or drug problem. | | | | | |
| | (2) | Respondent has an alcohol or drug problem. | | | | | |
| | (3) | Petitioner does not have a driver's license. | | | | | |
| | (4) | Respondent does not have a driver's license. | | | | | |
| | (5) | Petitioner's home environment is not suitable. Explain in 11. | | | | | |
| | (6) | Respondent's home environment is not suitable. Explain in 11. | | | | | |
| | (7) | Petitioner is in jail or a mental health institution. Explain in 11. | | | | | |
| | (8) | Respondent is in jail or a mental health institution. Explain in 11. | | | | | |
| | (9) | Petitioner is protected under a Domestic Abuse Protective Order. Explain in 11. | | | | | |
| | . , | Respondent is protected under a Domestic Abuse Protective Order. Explain in 11. | | | | | |
| | (11) | Explain: | | | | | |

Rule 17.200-Form 230: Proposed Parenting Plan, continued

2. Plan

- A. Read these definitions of legal custody and physical care:
 - (1) Legal custody means a parent has legal rights and responsibilities for the child. These include making decisions about medical care, education, extracurricular activities, and religious instruction.
 - (2) Joint legal custody means both parents have equal legal rights and responsibilities for the child. These include making decisions about medical care, education, extracurricular activities, and religious instruction.
 - (3) **Physical care** means providing the main home for the child and taking care of the child.
 - (A) Joint physical care means both parents have equal rights and responsibilities for providing

| | the main home for the child and taking care of the child. |
|-------|--|
| B. | Legal custody should be |
| | Check one |
| | (1) O Joint legal custody to both parents |
| | (2) To Petitioner |
| | (3) To Respondent |
| | (4) To other person |
| | Full name of other person: first, middle, last |
| C. | Physical care should be |
| | Check one |
| | (1) \bigcirc To Petitioner If you check (1), use D for Respondent's visitation. |
| | (2) \bigcirc To Respondent If you check (2), use D for Petitioner's visitation. |
| | (3) O Joint physical care to both parents If you check (3), use D(12) to explain the joint physical care schedule. |
| | (4) O To other person |
| _ | Full name of other person: first, middle, last |
| D. | Visitation Use D only if one parent will have physical care. This is the schedule for the other parent to see the children. |
| | (1) Visitation for |
| | Check one |
| | a. Petitioner |
| | b. Respondent |
| | (2) Visitation permission |
| | Check a, b, or c. |
| | a. O Visitation should not be allowed because: |
| | |
| | |
| | |
| | b. Visitation should be supervised because: |
| | |
| | |
| | |
| cembe | er 2013 Rule 17.200—Form 230 Page 3 of 9 |

(3)

Rule 17.200-Form 230: Proposed Parenting Plan, continued

| The supervisor for visita | ation should b | e | 's full name: fir | est middle last | |
|--|---------------------|-----------------|--------------------|-------------------|------------------|
| c. Regular unsupervise | d visitation s | - | | | |
| Check all that apply | a rioliation (| | the parente at | 9,00. | |
| i. Reasonable visitat | | | | | |
| ii. ☐ Mid-week visitatior M Tu W | on these da Th F | ys: | | | |
| | | From | a.m. to | p.m. | |
| iii. O Every weekend | | C |) a.m. | | Oa.m. |
| From | at 7 | C | p.m. to | at `week | p.m. |
| iv. Every other weeke | nd | | a.m. | | a.m. |
| From | at | □ | p.m. to | at _ | p.m. |
| v. Other Describe | 1 | ime | Day oj | week 1 | ime |
| V. Guidi Describe | | | | | |
| | | | | | |
| | | | | | |
| vi. Visitation will start on _ | | | | , 20 Year | |
| | Month . | | Day | Year | |
| Detailed holiday schedule | the children | :II baitb aitba | - Detitioner or De | | |
| This schedule tells on which holidays You do not have to fill in everything. | Any day that is | | | | with the parent |
| who already has the children on that | day. | | P = Petit | ioner R=R | Lespondent |
| Holiday | Ti | me | Every year P R | Even years P R | Odd years P R |
| New Year's Eve | : | a.m. p.m. | 00 | 00 | 0 |
| New Year's Day | : | O a.m. | 00 | 00 | 00 |
| Martin Luther King, Jr. Day | : | a.m. | 00 | 00 | 0 |
| President's Day | : | a.m. | ÓÓ | 00 | 0 |
| Memorial Day | : | a.m. p.m. | 00 | 00 | 0 |
| Independence Day July 4th | : | 8 a.m. | 00 | 00 | 0 |
| Labor Day | : | a.m. p.m. | 00 | 00 | 0 |
| Veterans' Day November 11th | : | a.m. p.m. | 00 | 00 | 0 |
| Thanksgiving Day | : | O a.m. | 00 | 00 | 00 |
| Christmas Eve | : | Q a.m. | \bigcirc | \bigcirc | \bigcirc |
| | | O p.m. | | | |

(4)

(5)

Rule 17.200-Form 230: Proposed Parenting Plan, continued

| Mother's Day | : | O a.m. O p.m. | 00 | 00 | 00 | | | |
|---|---|------------------|----|----|----|--|--|--|
| Father's Day | : | O a.m. O p.m. | 00 | 00 | 00 | | | |
| Petitioner's Birthday | : | Q a.m. Q p.m. | 00 | 00 | 00 | | | |
| Respondent's Birthday | : | O a.m. | 00 | 00 | 00 | | | |
| Halloween October 31st | : | O a.m. | 00 | 00 | 00 | | | |
| Other: Describe | : | a.m. p.m. | 00 | 00 | 00 | | | |
| Other: Describe | : | Q a.m. O p.m. | 00 | 00 | 00 | | | |
| Special rules for holidays Check one a. If a holiday falls on a Friday or a Monday, the parent with the holiday will have the whole weekend. b. If a holiday falls on a Monday or a Friday, the alternating weekend schedule in 3.a.iii. will continue. c. If a holiday falls on a Monday or a Friday, the alternating weekend schedule in D(2)c.iv. will continue. This means the parent who has the children on the holiday weekend may have the children two weekends in a row. d. Other Explain | | | | | | | | |
| Summer Check one a. Summer school vacation will be divided as Petitioner and Respondent agree. b. Petitioner and Respondent will each have one-half of the summer school vacation with alternate weekends to the other parent. The children will be returned to the parent with physical care at least one week before school starts. c. The parent without physical care will have two weeks of uninterrupted summer visitation with the abilidren and the parent with physical care will have two weeks of the parent with physical care will have two weeks of the parent with physical care will have two weeks of the parent with physical care will have two weeks of the parent with physical care will have two weeks of the parent with physical care will have two weeks of the parent with physical care will be the parent will be the parent will be the parent will be the parent will be the parent will be the parent will be the parent will be the parent will be the parent will be the parent will be the parent will be the parent will be the parent will be the parent will be the parent will be the parent will be the parent will be the parent | | | | | | | | |
| visitation with the children and the parent with physical care will have two weeks of uninterrupted summer visitation with the children. During the rest of the summer the weekly visitation schedule should be followed. | | | | | | | | |

Continued on next page

Other Explain _____

Rule 17.200—Form 230: Proposed Parenting Plan, continued

| (6) | Winter school holiday Check one |
|-----|--|
| | Winter school holidays will be divided as Petitioner and Respondent agree. |
| | b. Petitioner and Respondent will each have one-half of the winter school holiday and alternate the first and second half each year. |
| | c. Other Explain |
| | |
| | |
| (7) | Spring school break |
| | Check one |
| | a. O Spring school break will be divided as Petitioner and Respondent agree. |
| | b. Spring school break will be alternated every other year between Petitioner and Respondent. |
| | c. Petitioner and Respondent will each have one-half of each spring school break. |
| | d. Other Explain |
| | |
| | |
| (8) | The children's birthdays |
| | Check one |
| | a. OPetitioner and Respondent will have contact with the children on their birthdays as the parents may agree. |
| | b. A child's birthday will be spent with the parent who has the child on that day. |
| | c. Each child's birthday will be alternated from year to year between Petitioner and Respondent. |
| | d. O Petitioner and Respondent will each have no less than two hours of personal contact with the child on the child's birthday. |
| | e. Other Explain |
| | 9 |
| | |
| (9) | Pick up and drop off |
| ` ' | Check all that apply |
| | a. The parents will agree about pick up and drop off for each visit. |
| | b. The parent with visitation will pick up the children at the other parent's residence at the beginning of visitation and the parent with physical care will pick up the children at the end of visitation. |
| | c. Only certain people can help the parents with transportation. If persons other than Petitioner and Respondent will help them provide transportation of the children, |
| | only the following people are permitted to help: |

| Rule 17.200—Form 230: Proposed Parenting Plan, continued | |
|--|---|
| | xample, Petitioner and Respondent will meet |
| at a location between their residences): | Explain |
| (10) The parent without the children may contact the Check all that apply a. Calling the children Check one i. At reasonable hours ii. Any day from a.m. Phone number Phone number where children | · |
| b. Emailing the children at this address: Email v | where children can be contacted |
| c. Other Explain | |
| (11) Changes to the schedule Check all that apply a. The parties may agree to additional visitation because if one parent fails to arrive at the appointed minutes before cancelling the conditional visitation. The parties may agree to additional visitation because it is a conditional visitation. The parties may agree to additional visitation because it is a conditional visitation. The parties may agree to additional visitation because it is a conditional visitation. The parties may agree to additional visitation because it is a conditional visitation. The parties may agree to additional visitation because it is a conditional visitation. The parties may agree to additional visitation because it is a conditional visitation. The parties may agree to additional visitation because it is a conditional visitation. The parties may agree to additional visitation because it is a conditional visitation. The parties may agree to additional visitation because it is a conditional cause it is a conditional visitation because it is a condition because it is a condition because it is a condition beca | ed time, then the other parent will wait for at least e visit. der. |
| (12) Joint physical care plan Use only if both Petitioner and Respondent are given a. How Petitioner and Respondent will make decisions on school, medical care, religion, and | decisions about the children: For example, |
| b. How the children's time will be divided betwee You may use sections 3, 4, 5, 6, 7, and 8 for holi | |

Rule 17.200—Form 230: Proposed Parenting Plan, continued

| | C. | How the children's expenses will be paid: and school fees. | | ch as cloth | es, activities, |
|------|-----|--|------------------------------------|----------------------|----------------------|
| | d. | How Petitioner and Respondent will deal | with major changes or d | sagreeme | nts about the |
| | u. | children (including changes due to the ch | | | nto about the |
| | e. | Other issues: | | | |
| (13) | Che | solving disagreements eck one fore going to court to resolve disagreement Ask the following person to help them r | | ndent will | |
| | | Name | Relationship to parties | () Phone nu |) mber |
| | b. | Present street address Go to mediation. Do not check if media. or an injunction. | City tion will not work because | State of domestic | ZIP code violence |

Continued on next page

Rule 17.200—Form 230: Proposed Parenting Plan, continued

| 3. | Attori Check o | ney Help | | | | | | | | |
|---|-------------------|---|-------------------|---------------|--|---|-----------|------------------|-----------------------|---------|
| | _ | | did not help | me prepai | re or | fill in this paper. | | | | |
| B. An attorney helped me prepare or fill in this paper. | | | | | | | | | | |
| | Ŭ | If you check B | | - | | | | | | |
| | | Name of attorn | ney or organiza | ution, if any | Attorney's P.I.N. # – Ask the attorney | | | ney | _ | |
| | | Business addre | ess of attorney | or organizat | ion | City | | State | ZIP code | _ |
| | | ()_ | ne numher | _ (|) | number – optional | Attor | nov's om | ril address – antion | _ al |
| 4. | Certif | ication of S | | | | | | , | 1 | |
| •• | Section | 4 to be complete | ed only if filing | in paper or | if the | other party is exem se served on registe | | | filing. | |
| | I. | | | | certify | that on | | | . 20 | |
| | Print | your name | | , | 001111 | that on | | \overline{Day} | y Year | _ |
| | | d or gave a cop y at this addres | | oosed Parei | nting | Plan to the other | party or | the othe | er party's | |
| | Name o | f person to whor | n I delivered o | r mailed it | | | | | | |
| | Party's | or attorney's m | ailing address | | City | | | State | ZIP code | _ |
| 5. | This Pr | | ting Plan add | | | y and visitation is make it a part of t | | | rce. I want the | |
| | I, | | | , | certif | y under penalty o | of perjur | y and pu | rsuant to the | |
| | Prin | t your name | | | | | | | | |
| | | | | | | sed Parenting Placed Parenting Pla | | l agree v | with the Plan and | t |
| | 1.64 | | | , 20 | _ | Your signature* | | | | _ |
| | Month | | Day | Tear | | 1 our signature | | | | |
| | Mailing | address | | | City | | | State | ZIP code | - |
| | (|) | | | | | | | | |
| | Phone r | number | | Email addre. | SS | Ā | dditiona | l email ac | ldress – if available | _ |
| | | er filing electroni he form after sign | | | | e your signature on ti | his form. | If you are | filing electronically | , |
| | | | | | | | | | | |
| Dec | ember 20 | 13 | | Rule 1 | 7.200- | -Form 230 | | | Page 9 of | 9 |

[Court Order December 19, 2013]

Forms 231 to 300: Reserved

Rules 17.201 to 17.299 Reserved.

Rule 17.300 Forms for modifying child support. The following forms are for use in actions to modify a current child support order from an Iowa court.

Form 301: Application to Modify Child Support

Form 302: Cover Sheet for an Application to Modify Child Support

Form 303: Confidential Information Form

Form 304: Original Notice for Personal Service

Form 304a: Original Notice for Personal Service

Form 305: Acceptance of Service

Form 306: Directions for Service of Original Notice

Forms 307 and 308: Reserved

Form 309: Application and Affidavit to Defer Payment of Costs

Form 310: Affidavit of Service of Original Notice and Application to Modify Child

Support

Form 311: Protected Information Disclosure

Forms 312 to 314: Reserved

Form 315: Answer to Application to Modify Child Support

Form 316: General Answer to Application to Modify Child Support

Forms 317 to 321: Reserved

Form 322: Motion in a Child Support Modification

Form 323: Response to a Motion in a Child Support Modification

Form 324: Child Support Modification Financial Statement

Form 325: Affidavit of Mailing Notice

Form 326: Notice of Intent to File Written Application for Default Decree

Form 327: Request for Relief in a Child Support Modification

Form 328: Settlement Agreement on an Application to Modify Child Support

[Court Order December 19, 2013; March 6, 2014]

| Read the Guide to Representing Yourself in a Child Support Modification Case in Iowa on the Iowa Judicial | Branch v | vebsite |
|---|----------|---------|
| before using this form. | | |

- You cannot use this form to change child custody, physical care, or visitation arrangements.
- You cannot use this form if there is no current lowa court order or decree setting child support.
- Use this form only if you want to increase, decrease, or stop child support.
- "Applicant" is the person who files the first paper (an Application) to start a case to modify (change) child support. Applicant could have been either Petitioner or Respondent in the original case.

| | If filing electronically | vou must provide any | protected information in | full on form | 311 |
|---------|--------------------------|-------------------------|---------------------------|------------------|-----|
| Acres 1 | If funit ciecu onicunty, | you must provide unity. | pi otectea information ii | i juii on joini. | JI |

If filing in paper, you may use form 311 to provide any protected information in full.

| In the | e lowa District Court for | | | ounty |
|-----------------|---|--|--|--------|
| | | County of current chil | d support order | |
| Upon | the Petition of | Equity case r | 10 | |
| | | | (As stated in the current support ord | ler) |
| Petiti Full nam | Oner e of Petitioner as it is in the original case | Appl | ication to Modify Child Support | |
| and co | oncerning | | | |
| D | ondent | | | |
| 1. Pe | e of Respondent as it is in the original case ersonal Information Fill in all information for your safety, you may leave your Applicant's (the party seeking to | street address, phone numb | er, and email blank. | spouse |
| 1. Pe | e of Respondent as it is in the original case Prsonal Information Fill in all inf d fear for your safety, you may leave your | street address, phone numb | er, and email blank. | spouse |
| 1. Pe | e of Respondent as it is in the original case ersonal Information Fill in all infold fear for your safety, you may leave your Applicant's (the party seeking to | street address, phone numb | per, and email blank. Iformation: | spouse |
| 1. Pe | e of Respondent as it is in the original case ersonal Information Fill in all inf d fear for your safety, you may leave your Applicant's (the party seeking to Full name: first, middle, last | street address, phone number modify child support) ir | per, and email blank. Iformation: Birth year | spouse |
| 1. Pe | ersonal Information Fill in all inference of Respondent as it is in the original case ersonal Information Fill in all inference of fear for your safety, you may leave your Applicant's (the party seeking to Full name: first, middle, last Applicant's present street address County | street address, phone numbers and support) in the control of the c | oer, and email blank. Information: Birth year State ZIP code | spouse |
| 1. Pe | ersonal Information Fill in all inference of Respondent as it is in the original case ersonal Information Fill in all inference of fear for your safety, you may leave your Applicant's (the party seeking to Full name: first, middle, last Applicant's present street address County | street address, phone numbers and support) in the control of the c | oer, and email blank. Information: Birth year State ZIP code | spouse |
| 1. Pe | ersonal Information Fill in all inference dear for your safety, you may leave your Applicant's (the party seeking to Full name: first, middle, last Applicant's present street address County Other parent's information: | street address, phone numbers and support) in the control of the c | oer, and email blank. Information: Birth year State ZIP code Email address | spouse |

| | Ċ. | Other person (non-parent) who receives child support Check one | |
|----|----|---|------------|
| | | (1) There is no other person (non-parent) who receives child support in this case. | |
| | | (2) There is another person (non-parent) who receives child support in this case. | |
| | | If someone other than a parent gets child support in this case, check box (2) and fill in below person's name, year of birth, present residence, and contact information. | v the |
| | | Full name: first, middle, last Birth year | |
| | | Present street address City State ZIP code | ? |
| | | County Phone number Email address | |
| 2. | Ge | eneral Information about this Case | |
| | | Current child support order | |
| | | (1) Date the current child support order was entered: | |
| | | Month Day Year | |
| | | (2) County and state where the order was entered: | |
| | | County Stat | ? |
| | | (3) Case number on the current child support order: Case number | |
| | | | |
| | | (4) Person who pays child support in this case: Name: first, last | |
| | | (5) Person who receives child support in this case: | |
| | | Name: first, last | |
| | | (6) Current amount of child support paid: \$ per Amount Frequency | |
| | | Amount Frequency | |
| | B. | Copy of current child support order Check one | |
| | | (1) A copy of the current child support order is attached. | |
| | | (2) A copy of the current child support order is not attached. | |
| | C. | Child Support Recovery Unit (CSRU) Check one | |
| | | (1) The Child Support Recovery Unit (CSRU) is involved in this case. If CSRU is involved case, see the Important Notice to Applicant on page six of this form. | ed in this |
| | | (2) The Child Support Recovery Unit (CSRU) is not involved in this case. | |
| | D. | Collection Services Center (CSC) Check one | |
| | | (1) The Collection Services Center (CSC) is involved in this case. | |
| | | The CSC number is: | |
| | | (2) The Collection Services Center (CSC) is not involved in this case. | |
| | | | |

| E. | Other child support or | ders Check on | e | | | | |
|-----|---|---|--|-----------------|--|--|--|
| | (1) There are no oth | ner child support | orders for the child or children involve | d in this case. | | | |
| | (2) There are other | child support ord | ers for the child or children involved in | this case. | | | |
| | They are: | | | | | | |
| | Case Number | | County | State | | | |
| | | | | | | | |
| | Case Number | | County | State | | | |
| | ☐ Check the orders. | is box if you are at | taching a separate sheet listing additiona | l child support | | | |
| | 2.2.2 | | | | | | |
| F. | The following children | are covered by | the current child support order: | | | | |
| | First, middle, & last initials of each child | Birth year | First, middle, & last initials of each child | Birth year | | | |
| | (1) | | (4) | | | | |
| | (2) | | (5) | | | | |
| | (3) | | (6) | | | | |
| G. | The person payi | ile court order tha ng support has c | changed because Check all that on the child or children ustody of the children. The changed where the child or children are the juvenile court order was entered or the properties. | are living. | | | |
| | County | | Case Number | | | | |
| | (2) One or more of t | he children live v | vith the parent who is paying support. | | | | |
| | | t order that sets i | • | | | | |
| | (3) ☐ One or more of t(4) ☐ My (Applicant's) | | nger qualify for child support. e down. | | | | |
| | | • | ome has gone up. | | | | |
| | (6) ☐ Other reason <i>Explain</i> | | | | | | |
| | | | | | | | |
| | | | | | | | |
| н | Child support amount | should be | Check all that apply | | | | |
| ٠٠. | (1) ☐ Raised Explain | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | (-, <u> </u> | | | | | | |

| I. | Tax deduction for the children Check (1) or (2) | | | | | | | |
|----|---|--|--|--|--|--|--|--|
| | (1) There is no court order at this time on tax deductions for the children. | | | | | | | |
| | (2) There is a court order at this time on tax deductions for the children. | | | | | | | |
| | If you check (2), check a or b: | | | | | | | |
| | A court order currently says who gets the tax deduction for the child or children and it should stay the same. | | | | | | | |
| | b. A court order currently says who gets the tax deduction for the child or children and it should be changed. <i>Explain</i> | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| J. | Health care expenses for the children Check (1) or (2) | | | | | | | |
| | (1) There is no court order at this time on who pays health care expenses. | | | | | | | |
| | (2) There is a court order at this time on who pays health care expenses. | | | | | | | |
| | If you check (2), check a or b: | | | | | | | |
| | A court order currently says who pays for health care expenses for the child or children and it should stay the same. | | | | | | | |
| | A court order currently says who pays for health care expenses and it should be changed. Explain | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| K. | The other party is Check each that is true | | | | | | | |
| | (1) In the military service | | | | | | | |
| | (2) In prison or jail at in in | | | | | | | |
| | Name of facility State | | | | | | | |
| L. | Protective or no contact order Check (1) or (2) | | | | | | | |
| | (1) There is no "protective order" or "no-contact order" between any of the parties and me | | | | | | | |
| | (Applicant). | | | | | | | |
| | (2) There is a "protective order" or "no-contact order." If you check (2), fill in the following information: | | | | | | | |
| | a. County and state where the order came from: | | | | | | | |
| | b. Court case number: | | | | | | | |

| Rule | 17.30 | 00—Form : | 301: Application to Modify Child Support, continued |
|------|-------|-----------|--|
| | M. | Other i | information: |
| | | | |
| | | | |
| 3. | Ар | plicant | 's Request |
| | A. | Applica | ant asks the court to: |
| | | Check a | all that apply. The court will only consider items that are checked. |
| | | (1) | Raise the current child support payment. |
| | | (2) | Lower the current child support payment. |
| | | (3) | End the current child support payment. |
| | | (4) | Set child support for the parent who does not have the children. |
| | | (5) | Change who gets the tax deduction for the child or children. |
| | | (6) | Change who pays for health care expenses for the child or children. |
| | | (7) | Order that the other party pay the court fees. |
| | | (8) | Order that the other party pay my attorney fees. |
| | | (9) | Other request: |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Continued on next page

| 4. | Attorr Check of | ney Help | | | | | |
|--|--------------------|--|---------------------------------|---|--|------------------------|----------------------------|
| | A. | | did not help | me prepare o | fill in this paper | 7. | |
| B. An attorney helped me prepare or fill in this paper. If you check B, you must fill in the following information: | | | | | this paper. | | |
| | | Name of attorr | ney or organiza | tion, if any | Attorney's P.I.N | L# - Ask the attor | ney |
| | | | | or organization | City | State | ZIP code |
| | | Attorney's pho | ne number | () Attorney's fa | x number – optional | Attorney's emo | iil address – optional |
| 5. | Check A | Applicant wi | oplicant is filing | g in paper, not el | ectronically ents at the attor nts in this case a | - | |
| 6. | Oath | and Signati | ure | | | | |
| | of perj | - | uant to the la s true and co | ws of the Stat rrect. | ad this Applicati | e information I | |
| | Signed | on: Month | Day | , 20 | Your signature* | | |
| | Mailing | address | | \overline{c} | ity | | ZIP code |
| | 1 | \ | | | | | |
| | Phone n | number | Emai | il address | Ad | ditional email add | ress, if applicable |
| | | er filing electrom he form after sign | sing it and then fi | le electronically. Important N page for instru | otice to Applic otice to Applic actions for filing olication and an | ant an Application. | |
| | | • | | | overy Unit (CSI h forms on CSF | , | in this case, |
| | | • | See the C | Guide to Repre | sentina Yoursei | f in a Child Sun | port |

Modification Case in Iowa for information on serving papers.

Instructions for Rule 17.300-Form 301: Application to Modify Child Support, continued

Do not file these instructions

Instructions for Filing an Application to Modify Child Support

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically, even if your original case was in paper, unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

☐ Filing your Application electronically

- If you are filing your Application in a county that uses electronic filing, you must register to
 electronically file. For help with registration, see the eFiler's User Guide <u>How to Register Pro Se (Self Represented)</u> for eFiling.
- · After you have registered, log in to the electronic filing system to electronically file your Application.
- For help electronically filing your Application, see <u>How to eFile a New Case</u>.
- With your Application, you must also file an Original Notice (304) and a Protected Information Disclosure (311).
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling
 of your Application and other documents.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My
 Filings, correct the error, and resubmit your filing. For help, see <u>How to Resubmit a Returned Filing</u>.
- Log in to your eFile account and download and print your Application and Original Notice so that you
 can serve it on (deliver it to) the other party.
- For help finding and downloading your Application and Original Notice, please see <u>My Filings</u>
 <u>Reference Guide</u>.

Filing your Application in paper

- If the county where you will be filing your Application does not yet accept electronic filing, you must
 proceed in paper. If the county does accept electronic filing, you must proceed electronically, unless
 you have received permission from the court to file in paper.
- With your Application (301), you must also file an Application Cover Sheet (302), an Original Notice (304a), and a Confidential Information Form (303).
- Forms 301 and 304a: Make two photocopies if you can deliver copies of these forms to the other party
 in-person or by mail. Make three photocopies if you are going to ask the county sheriff or a civil
 process server to deliver these forms to the other party.

Note about making photocopies: You should make your photocopies before you go to the courthouse to file your papers. It is expensive to make photocopies at the clerk of court office. It is cheaper to make the copies at a business that makes photocopies or at a public library.

- If the Child Support Recovery Unit (CSRU) is involved in your child support modification case, you
 must also provide each form you file to the CSRU office that serves the county where your child
 support case is filed.
- Forms 302 and 303: You do not have to make photocopies of these forms.

Instructions for Rule 17.300-Form 301: Application to Modify Child Support, continued

- Take the original forms you filled in and the photocopies to the clerk of court office in your county.
 Tell the clerk at the counter you are filing an Application to Modify Child Support.
- Give the clerk at the counter these forms:
 - 301 Application to Modify Child Support
 - 302 Coversheet for an Application to Modify Child Support
 - 303 Confidential Information Form (Do not make copies of this form.)
 - 304a Original Notice
- Pay the filing fee. If you cannot afford to pay the filing fee, prepare and file form 309.
- The clerk at the counter can tell you the amount of the filing fee. The Iowa legislature sets these fees
 and periodically raises them, so check with the clerk's office to confirm the current filing fee.
- The clerk of court will sign the Original Notice (304a). You will have to serve this form on (deliver it to) the other party.
- The clerk at the counter will time-stamp each of the copies (original and photocopies).

Do not file these instructions

Rule 17.300—Form 302: Cover Sheet for an Application to Modify Child Support.

| Applicant uses this form for p | paper minig only, do not in | ic in electronic cases. | | |
|--------------------------------|--|--|-------|----------|
| For court use only Case nun | nber | County where case is file | ed | _ |
| Applicant | | | | |
| Applicant's first name | Middle name | Last name | | - |
| Street address | | City | State | ZIP code |
| () Phone number | Email address | | | |
| Case name | | | | |
| Petitioner's first name | Middle name | Last name | | - |
| VS. | | | | |
| Respondent's first name | Middle name | Last name | | _ |
| Nature of the Case: | EQUITY—Domesti Modification—childi | c Relations en involved (CD-DC) | ı | |
| | 252A—Support action 252A.18—Foreign supp 252B.11—Cost recover 252C—Administrative C 252D—Income withhold 252E—Medical support 252K—UFISA (DR-R1) | y (DR-D4) Order (DR-D5) Iing (DR-D6) | | |

Note to Applicant

- Applicant must complete this cover sheet if filing in paper and give it to the district court clerk when filing an Application to Modify Child Support.
- Do not serve this cover sheet on Respondent.
- This cover sheet is for statistical purposes only. It has no legal effect in the case.
- For electronic filers: You do not have to file this form. This information is automatically generated when you submit your documents electronically.

Rule 17.300—Form 303: Confidential Information Form

This form is to be used by paper filers only.

Each party must complete one of these forms if filing in paper.

lowa Code section 602.6111 requires the parties to a case to provide the clerk of court with certain personal identification information. Each party's completed form will be kept confidential by the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| ln | the Iowa District Court for | County | v where Applic | ation is filed |
|----|---|---------------|----------------|-------------------------|
| Up | pon the Petition of | | quity case n | 10 |
| | titioner name of Petitioner as it is in the Application | | Confide | ential Information Form |
| an | d concerning | | | |
| | espondent name of Respondent as it is in the Application | | | |
| 1. | Applicant's Information | | | |
| | Full name: First, Middle, Last | Birth do | ite / | Social Security number |
| 2. | Other Party's Information | | / / | |
| | Full name: First, Middle, Last | Birth do | nte / | Social Security number |
| 3. | Children's Information | | | |
| | A. Child 1: | | | |
| | Full name: First, Middle, Last | Birth do | ite / | Social Security number |
| | B. Child 2: | | / / | |
| | Full name: First, Middle, Last | Birth do | ıte ' | Social Security number |
| | C. Child 3: | | | |
| | Full name: First, Middle, Last | Birth do | ite / | Social Security number |
| | D. Child 4: | | | |
| | Full name: First, Middle, Last | Birth do | nte / | Social Security number |
| | C | ontinued on i | rext page | |

| Rule | : 17.300—Form 303 Confidential Infor | mation Form, continue | ed . | | | |
|------|--|-----------------------|---|------------------|-------------------------|------|
| | E. Child 5: | | | | | |
| | | | / | / | | |
| | Full name: First, Middle, Last | | Birth date | | Social Security num | ber |
| | ☐ Check this box if you have | e attached a separ | ate sheet listing | additional chile | dren. | |
| 4. | Signature of Provider | of Informati | on | | | |
| | The party or parties submit this inf used to enforce any support order provided for in section 598. If a painformation with the clerk of court of the court of th | under the Code of lo | owa, chapters 234, ployment changes, | 252A, 252C, 252 | 2F, 252H, 252K, or 600B | , as |
| | Information provided by: | | | | | |
| | | Print your full no | ame: first, middle | e, last | | |
| | | | | | , 20 | |
| | Your signature | Λ | 10nth | Day | Year | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Important Notice

Do not give copies of this form to anyone except the clerk of court.

Rule 17.300—Form 304: Original Notice for Personal Service

| Applicant must serve the Application on the other party within 90 days after filing the | he Application. |
|---|-----------------|
|---|-----------------|

Failure to meet this deadline may result in the court dismissing the Application.

Read the *Guide to Representing Yourself in a Child Support Modification Case in Iowa* on the Iowa Judicial Branch website for additional important instructions.

- If filing electronically, Applicant must complete this form.
- If filing in paper, Applicant must use form 304a.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| n the low | a District Co | ourt for | | | County |
|-------------------------------------|-------------------------------|---|---------------------------|---|--------|
| | | | County where | Application is filed | |
| Jpon the | Petition of | | | Original Notice for Personal Service | |
| Petitioner | tioner as it is in the 2 | Application | - | Personal Service | |
| nd concer | ning | | | | |
| Responde | nt condent as it is in the | ? Application | - | | |
| o: | | | | | |
| Petition | ner or Responde | nt | | | |
| Other p | erson receiving | child support in this cas | e, if any. | | |
| | | covery Unit is involved in covery Unit" on the secon | | | |
| A coAppl | py of the Applicant is not re | | nild Support (f orney. | isking for a change in chil orm 301) is attached to t ion case: | |
| Applica | ınt's name | | | | |
| Mailing | g address | City | State | ZIP code | |
| (| _) | | | <u>-</u> | |
| Phone i | number | Email address | | | |

For party receiving this Original Notice: Important instructions on next page

February 2014 Rule 17.300—Form 304 Page 1 of 3*

*Upon electronic filing, a clerk's signature page will be attached to this document as page 3.

Rule 17.300-Form 304: Original Notice for Personal Service, continued

Instructions to Party Receiving the Original Notice

- A. You must file an Answer or a Motion with the clerk of court in the above county within 20 days after you receive this Original Notice. If you do not file an Answer or Motion within 20 days after receiving this Original Notice, the court may enter a judgment against you giving Applicant what he or she asked for in the Application.
- B. For help in this case, and for forms that you must use if you choose to represent yourself without an attorney, visit the Iowa Judicial Branch website at http://www.iowacourts.gov/ and click on "Court Rules & Forms" or on "For the Public."
- C. If you received Application form 301, you may use Answer form 315.
- D. This case has been filed in a county that uses electronic filing. You must register to eFile through the Iowa Judicial Branch website at https://www.iowacourts.state.ia.us/Efile and obtain a log in and password for filing and viewing documents in your case and for receiving service and notices from the court.
 - For general rules and information on electronic filing, refer to the Iowa Court Rules Chapter 16
 Pertaining to the Use of the Electronic Document Management System, available on the Iowa Judicial
 Branch website.
 - For court rules on the Protection of Personal Privacy in court filings, refer to Division VI of the Iowa Court Rules Chapter 16.
 - If you are unable to proceed electronically, you must receive permission from the court to file in paper.
 Contact the clerk of court in the county where the Application was filed for more information on being excused from electronic filing.
- E. If you electronically file your Answer or Motion, it will be served automatically on Applicant. A Notice of Electronic Filing (NEF) will tell you if the court has excused Applicant from electronic filing. If the court has excused Applicant from electronic filing, you must mail a copy of your Answer or Motion to Appliant.

Important Notice

You should talk to an attorney at once to protect your interests.

Mailing address

Phone number

Rule 17.300—Form 304a: Original Notice for Personal Service

| | licant must serve the Application on the other par re to meet this deadline may result in the court dismis | |
|--------|---|--|
|] | - | d Support Modification Case in Iowa on the Iowa Judicial |
| | If filing electronically, Applicant must con If filing in paper, Applicant must use this | |
| If you | u do not understand how to use this form, or if yo | ou should use this form, talk to an attorney. |
| In t | he Iowa District Court for | County |
| | | County where Application is filed |
| Upo | on the Petition of | |
| | | Original Notice for Personal Service |
| | itioner ame of Petitioner as it is in the Application | |
| and | concerning | |
| | spondent ame of Respondent as it is in the Application | |
| To: | | |
| | Petitioner or Respondent | |
| | Other person receiving child support in this case | e, if any. |
| | If the Child Support Recovery Unit is involved in list "Child Support Recovery Unit" on the secon | |
| | Applicant (the party bringing this case) support. |) has a lawsuit asking for a change in child |
| | | nild Support (form 301) is attached to this Notice. orney. |
| | Applicant's contact information during | this modification case: |
| | Applicant's name | |

Important instructions on next page

State

ZIP code

City

Email address

 Rule 17.300-Form 304a: Original Notice for Personal Service, continued

Instructions to Party Receiving this Original Notice

- You must file an Answer or a Motion with the clerk of court in the above county within 20 days after you receive this Application. If you do not file an Answer or Motion within 20 days after receiving this Application, the court may enter a judgment against you giving Applicant what is asked for in the Application.
- If you received Application form 301, you may use Answer form 315.
- After you file your Answer or Motion, you must serve a copy of it on Applicant.

| (SEAL) | | |
|--------|----------------|-------------------|
| | Clerk of Court | |
| | | County Courthouse |
| | | , lowa |
| | City | ZIP code |

Important Notice

You should talk to an attorney at once to protect your interests.

Rule 17.300—Form 305: Acceptance of Service

Applicant must complete this section:

| In the lowa District Court fo | County where Applicate | ion is filed | County |
|--|---|---------------------|------------|
| Upon the Petition of | Equity case no. | | |
| Petitioner Full name of Petitioner as it is in the Application | | otance of Servi | ce |
| and concerning | | | |
| Respondent Full name of Respondent as it is in the Applicati | m | | |
| Applicant must file this form with cleri | of court soon after the other party signs | it. | |
| • | n, and Signature of Other Pai ance of Service, he or she must return th e clerk of court. | - | soon after |
| , | , am the other part | y in this case. I r | eceived a |
| copy of the Original Notice and Service. I certify under penalty information I have provided in th | he Application for this case. I have of perjury and pursuant to the laws is Acceptance of Service is true a | s of the State of I | • |
| Signed: Month Day | O Year Other party's signo | ature | |
| Other party's mailing address | City | State | ZIP code |
| () | | | |
| | ail address | | |

Important Notice

By signing this form, you are not agreeing to what Applicant wants. You are only agreeing that you received a copy of the Original Notice and Application.

Rule 17.300—Form 306: Directions for Service of Original Notice

Applicant must complete this form if the sheriff or a process server will deliver the Application and Original Notice to the other party.

Do not use this form if the other party has already received the Application and Original Notice.

Do not file this form with the clerk of court in paper or electronically.

Give this form to the sheriff or other process server with your Application (301) and Original Notice (304 if electronically filing or 304a if filing in paper).

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| ounty where Application is | filed | Equity case number | | |
|---|----------------------|-----------------------------------|--------------------|-----------------|
| Name and Locati Check one and fill in the | | or Other Process Server | , | |
| A. Sheriff In con | ınty where the othe | r party will be served County | | |
| Street address | | City | State | ZIP code |
| B. Other proces | ss server | | | |
| Name of other p | process server servi | ng the Notice | | |
| Street address | | City | State | ZIP code |
| Person to be Ser | ved | | | |
| Other party's name | | () Phone number | | |
| Address where the other | | City | State | ZIP code |
| . i cison requesti | ng oci vice | () | | |
| Your (Applicant's) name | ? | Phone number | | |
| Your (Applicant's) prese | ent mailing address | City | State | ZIP code |
| . Special Instruction | ons for Servic | e Provide information that will h | help the sheriff o | r process serve |
| | | | 50 | |
| - | | | | |
| | | | | |
| - | | | | |
| | (| Continued on next page | | |

Rule 17.300—Form 306: Directions for Service of Original Notice, continued

| 5. | Costs of Service Check one | |
|----|---|--|
| | A. Applicant will pay the costs of the Sheriff If you cannot afford the costs, file form 309. | or other process server. |
| | B. Costs for Sheriff deferred by court order: | Clerk of court: Sign only if costs deferred by court order |
| 6. | Notification After completion of service, the sheriff or other proceduesting service. | cess server will notify the person |
| | Date signed: Month Day Year | Your signature |

Rule 17.300—Form 309: Application and Affidavit to Defer Payment of Costs

Applicant uses this form only if Applicant cannot afford to pay the fees to file and serve the Application.

- Use this form if it would cause you to suffer a hardship if you had to pay the filing fee and cost of serving papers.
- You may need to provide proof of your income and assets and your expenses.
- Costs and fees paid to someone other than the court or sheriff cannot be waived.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the | e Iowa District Court for | nty where Application is filed |
|--------|---|---|
| Upor | the Petition of | Equity case no |
| | ioner ne of Petitioner as it is in the Application | Application and Affidavit to Defer Payment of Costs |
| and c | oncerning | |
| | pondent ne of Respondent as it is in the Application | |
| 1. R | equest | |
| Α. | My name is | |
| В. | For my Application and Affidavit, I state the Check all that apply | at: |
| | (1) I am unable to pay the filing fee or ser | rvice costs or other court costs. |
| | (2) ask the court for permission to proce | eed without prepayment of costs and fees. |
| | (3) I am filing this Application and Affidav | it in good faith. |
| | (4) I believe I am entitled to what I am as | king for in this case. |
| С | . Household | |
| | There are people living in my house Number | ehold. |
| D | . My household income is \$ | per month. |
| | Put the total amount of all income and benefits bej | fore deductions for all members of your household. |
| Ε. | My income comes from: List the sources of your income. Examples: salary, | wages, or benefits such as unemployment, Title 19, FIP. |
| | | |
| | | |
| | | |

Rule 17.300—Form 309: Application and Affidavit to Defer Payment of Costs, continued

| F. | My household has the | e following monthly expenses: |
|----|----------------------|---------------------------------|
| | (1) Rent or mortgage | \$ |
| | (2) Utilities | \$ |
| | (3) Phone | \$ |
| | (4) Food | \$ |
| | (5) Transportation | \$ |
| G. | I have \$ | in cash, checking, and savings. |

Continued on next page

2. Attorney Help

Rule 17.300—Form 309: Application and Affidavit to Defer Payment of Costs, continued

| | Name of attor | ney or organ | nization, if any | Attori | ney 's P.I.N. | #-Ask the attor | ney |
|---|---|--|--|---|--|--|------------------------------|
| | Business addr | ess of attorn | ney or organiza | ation City | | State | ZIP code |
| | ()_Attorney's ph | one number | (Attorne | y 's fax numbe | r – optional | Attorney's emo | nil address – o _l |
| Section | fication of S 3 to be comple | ted <mark>only if fi</mark> | ling in paper o | or if the other p | oarty is exen | upt from electrons ered parties. | ic filing. |
| | | | - | | _ | - | 20 |
| I, | vour name | | | , certify that | Month | \overline{Day} | , 2U v Yea |
| I maile at this Name o | d or gave a co address: of person to who | om I delivere | d or mailed it | d Affidavit to \overline{City} | the other pa | State | ZIP code |
| I maile at this Name of Party's | address: of person to who or attorney's n | om I delivere nailing addre | ed or mailed it | City | | State | ZIP code |
| I maile at this Name of Party's | address: of person to who or attorney's n | om I delivere nailing addre | ed or mailed it | City | | | ZIP code |
| I maile at this Name of Party's Oath I, the Sta | address: of person to who or attorney's n and Signat Print your n ate of lowa the | om I delivere nailing addre t ure name at I have re plication an | ed or mailed it ess, certify ead this Appl d Affidavit is | City under penalt ication and A true and cor | ty of perjun Affidavit and rect. | State | ZIP code |
| I maile at this Name of Party's Oath I, the Sta | address: of person to who or attorney's n and Signat Print your n ate of lowa th | om I delivere nailing addre t ure name at I have re plication an | ed or mailed it | City under penalt ication and A true and cor | ty of perjun Affidavit and rect. | State y and pursuant | ZIP code |
| I maile at this Name of Party's Oath I, the Staprovid Signed | address: of person to who or attorney's n and Signat Print your n ate of lowa the | om I delivere nailing addre t ure name at I have re plication an | ed or mailed it ess, certify ead this Appl d Affidavit is | City under penalt ication and A true and cor | ty of perjun Affidavit and rect. | State y and pursuant | ZIP code |

Rule 17.300—Form 309

February 2014

Rule 17.300—Form 310: Affidavit of Service of Original Notice and Application to Modify Child Support

Applicant: Use this form only if someone other than Applicant (you), or a person who is not a sheriff or a process server, delivered a copy of the Application to the other party.

- The person, other than Applicant, who gave the Application and Original Notice to the other party, fills in this form.
- Applicant, or the person who gave the Application and Original Notice to the other party, must file this form with the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the Iowa District | Court for | County where A | <i>pplication</i> | is filed | ounty |
|---|------------------------|----------------------|-------------------|---|----------------------------|
| Upon the Petition of | Jpon the Petition of | | Equity case no | | |
| Petitioner Full name: first, middle, | last | | ice and | of Service of Application hild Suppor | to Modify |
| and concerning | | | | | |
| Respondent Full name: first, m | iddle, last | _ | | | |
| 1. Affidavit | | | | | |
| I, | | , delivered | I а сору с | of the Original | Notice and |
| | | | | | |
| Application to Modify Chil | d Support for th | is case to: | | | <i>Check one</i> □ a.m. |
| | on | th | | 20 at | p.m. |
| Name of Other Parent | on <i>Mon</i> | th | Day | 20 at | me - |
| by handing the other part | y copies of the a | attached pape | rs. | | |
| 2. Oath and Signature To be completed by the person | who gave the Appl | lication to the oth | ner party. | | |
| I, | | , have rea | d this Aff | idavit of Servi | ce, and I certify |
| Print your name | | | | | |
| under penalty of perjury a have provided in this Affic | davit of Service | is true and co | rrect. | f lowa that the | information I |
| Signed on: Month Day | year Year | Your signature | * | | |
| Mailing address | | City | | State | ZIP code |
| () Phone number | Email address | | — Addi | tional email add | ress – if applicable |
| * If you are filing electronically, | scan the form after si | gning it and then fi | ìle electroni | cally. | |
| February 2014 | Rule | 17.300—Form 310 |) | | Page 1 of 1 |

[Court Order March 6, 2014]

Rule 17.300—Form 311: Protected Information Disclosure

It is the responsibility of counsel, if any, and the parties to ensure that protected information is omitted or redacted from documents or exhibits filed with the court. The clerk of court will not review filings to determine whether the required omissions or redactions have been made. For electronic filers, see Division VI of chapter 16 of the Iowa Court Rules. For paper filers, see Iowa Rule of Civil Procedure 1.422.

Use this form to identify the full version of any protected information redacted in other documents you have filed.

☐ If filing electronically:

- Applicant must complete this form (311) and file it with the Application (301) and Original Notice (304).
- The other party must complete this form if adding or correcting protected information.
- Paper filers also may use form 311 to assist in complying with Iowa Rule of Civil Procedure 1.422.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the lowa District Court for | County |
|--|-----------------------------------|
| C | County where Application is filed |
| Upon the Petition of | Equity case no |
| Petitioner Full name of Petitioner as it is in the Application | Protected Information Disclosure |
| and concerning | |
| Respondent Full name of Respondent as it is in the Application | |

For electronic filers:

When protected information, as defined in lowa Court Rule 16.602, is required by law to be included or is material to the case and must be included in non-confidential documents, a party shall include the protected information on this form.

For an explanation of a filer's responsibility and the procedures to use for protecting personal information, refer to lowa Court Rules: Chapter 16, Rules Pertaining to the Use of the Electronic Document Management System, Division VI, Protection of Personal Privacy. Rule 16.602 provides the list of protected information. Rule 16.604 provides a list of information that may be redacted.

1. Petitioner

Provide the complete version of protected information here, and the redacted version should be included in documents you file.

Middle

Name

First

Protected Information Type Complete Information Redacted Information (See Rules 16.602 and 16.604) (See Rule 16.605) A. Social security number XXX-XX-XXXX Last four digits only B. Financial account numbers Full account number Partial account number only C. Date of birth mm/dd/yyyy Year only D. Individual taxpayer identification numbers XXX-XX-XXXX Last four digits only

Last

 $Rule\ 17.300-Form\ 311: \textit{Protected Information Disclosure},\ continued$

| E. | Personal identification numbers | Full number | Partial only |
|----|----------------------------------|------------------|---------------------|
| F. | Other unique identifying numbers | Full number | Partial only |
| G. | | | |
| | Additional protected information | Full information | Partial information |
| H. | | | |
| | Additional protected information | Full information | Partial information |
| I. | | | |
| | Additional protected information | Full information | Partial information |
| J. | | | |
| | Additional protected information | Full information | Partial information |

Check this box if you are attaching a separate sheet listing additional information for Petitioner.

2. Respondent

Provide the complete version of protected information here, and the redacted version should be included in documents you file.

| Nan | ne | | |
|-----|-------|--------|------|
| | First | Middle | Last |
| r | | | |

| Protected Information Type | Complete Information (See Rules 16.602 and 16.604) | Redacted Information (See Rule 16.605) |
|---|---|---|
| A. Social security number | XXX-XX-XXXX | Last four digits only |
| B. Financial account numbers | Full account number | Partial account number only |
| C. Date of birth | / / mm/dd/yyyy | Year only |
| D. Individual taxpayer identification numbers | XXX-XX-XXXX | Last four digits only |
| E. Personal identification numbers | Full number | Partial only |
| F. Other unique identifying numbers | Full number | Partial only |
| G. | | |
| Additional protected information | Full information | Partial information |
| H. | | |
| Additional protected information | Full information | Partial information |
| I. | | |
| Additional protected information | Full information | Partial information |
| J. | | |
| Additional protected information | Full information | Partial information |

Check this box if you are attaching a separate sheet listing additional information for Respondent.

Rule 17.300—Form 311: Protected Information Disclosure, continued

3. Other Parties

Provide the complete version of protected information here, and the redacted version should be included in documents you file.

| ne | | |
|---|--|-----------------------------|
| First | Middle | Last |
| Protected Information Type | Complete Information (See Rules 16.602 and 16.604 | |
| A. Social security number | XXX-XX-XXXX | Last four digits only |
| B. Financial account numbers | Full account number | Partial account number only |
| C. Date of birth | / mm/dd/yyyy | Year only |
| D. Individual taxpayer identification numbers | XXX-XX-XXXX | Last four digits only |
| E. Personal identification numbers | Full number | Partial only |
| F. Other unique identifying numbers | Full number | Partial only |
| G. Additional protected information | Full information | Partial information |
| H. Additional protected information | Full information | Partial information |
| l. Additional protected information | Full information | Partial information |
| J. Additional protected information | Full information | Partial information |

4. Children

Provide the complete version of protected information here, and the redacted version should be included in documents you file.

| A. | Protected Information Type | Complete Information (See Rules 16.602 and 16.604) | Redacted Information (See Rule 16.605) |
|----|----------------------------|---|---|
| | (1) Child's full name | First, middle, last name | Child's initials |
| | (2) Social security number | <i>XXX-XX-XXXX</i> | Last four digits only |
| | (3) Date of birth | / / mm/dd/yyyy | Year only |

Check this box if you are attaching a separate sheet listing additional information for other parties.

Rule 17.300—Form 311: Protected Information Disclosure, continued

| B. | Protected Information Type | Complete Information (See Rules 16.602 and 16.604) | Redacted Information (See Rule 16.605) |
|----|----------------------------|---|---|
| | (1) Child's full name | First, middle, last name | Child's initials |
| | (2) Social security number | XXX-XX-XXXX | Last four digits only |
| | (3) Date of birth | / / mm/dd/yyyy | Year only |

| C. | Protected Information Type | Complete Information (See Rules 16.602 and 16.604) | Redacted Information (See Rule 16.605) |
|----|----------------------------|---|---|
| | (1) Child's full name | First, middle, last name | Child's initials |
| | (2) Social security number | XXX-XX-XXXX | Last four digits only |
| | (3) Date of birth | / mm/dd/yyyy | Year only |

| D. | Protected Information Type | Complete Information (See Rules 16.602 and 16.604) | Redacted Information (See Rule 16.605) |
|----|----------------------------|---|---|
| | (1) Child's full name | First, middle, last name | Child's initials |
| | (2) Social security number | XXX-XX-XXXX | Last four digits only |
| | (3) Date of birth | mm/dd/yyyy | Year only |

| E. | Protected Information Type | Complete Information (See Rules 16.602 and 16.604) | Redacted Information (See Rule 16.605) |
|----|----------------------------|---|---|
| | (1) Child's full name | First, middle, last name | Child's initials |
| | (2) Social security number | XXX-XX-XXXX | Last four digits only |
| | (3) Date of birth | / mm/dd/yyyy | Year only |

Check this box if you are attaching a separate sheet listing additional children.

Continued on next page

Rule 17.300—Form 311: Protected Information Disclosure, continued

| Handwritten signature of party or attorney if filing in paper | | S Electronic signa if filing electron | | ty or attorney |
|--|------|--|---------------|----------------|
| Law firm, if applicable | | | | |
| Mailing address | City | | State | ZIP code |
| () Phone number | | | | |
| Email address | | Additional email ad | ldress, if ap | plicable |

Date information provided

The party served with an Application to Modify Child Support must file an Answer within **20 days** after receiving the Application and Original Notice, or the **court may enter a judgment against that party** giving Applicant what he or she asked for in the Application.

Use this Answer form 315 if you received Application form 301, otherwise use form 316.

Read the Guide to Representing Yourself in a Child Support Modification Case in Iowa on the Iowa Judicial Branch website before using this form.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure (311) if you have not already done so.
- If filing in paper, you may use form 311 to provide any protected information in full..

| In the Iowa District Court for | County where Application is filed |
|---|---|
| Upon the Application of | Equity case no |
| Petitioner Full name of Petitioner as it is in the Application | Answer to Application to Modify Child Support |
| and concerning | |
| Respondent Full name of Respondent as it is in the Application | _ |
| | |
| A. Applicant's (the party seeking to mo If paragraph 1A of the Petition (for | tion that you know. Idify child support) information Check one form 301) is not correct, check (2) and fill in the blanks. Sent residence, and contact information are correct in the |
| If paragraph 1A of the Petition (for (1) Applicant's name, birth year, presequence Application. | dify child support) information Check one orm 301) is not correct, check (2) and fill in the blanks. |
| A. Applicant's (the party seeking to mo If paragraph 1A of the Petition (for (1) Applicant's name, birth year, presapplication. (2) Applicant's name, birth year, presapplication. | odify child support) information Check one orm 301) is not correct, check (2) and fill in the blanks. sent residence, and contact information are correct in the |
| A. Applicant's (the party seeking to mo | odify child support) information Check one orm 301) is not correct, check (2) and fill in the blanks. sent residence, and contact information are correct in the sent residence, and contact information are not correct in the |

| | B. | - | other parent's) informatio If paragraph 1B of the Petitio | | | heck (2) and fill in | the blanks |
|----|----|-------------------|--|----------------|--------------------|-----------------------|-------------------------|
| | | | Your (other parent's) name, | | | | |
| | | | | birti year, p | resent residenc | e, and contact into | mation are correct |
| | | | in the Application. | ont rocidona | a and contact in | eformation are not | correct in the |
| | | | Your name, birth year, prese | ent residend | e, and contact if | normation are not | correct in the |
| | | | Application. | | | | |
| | | | The correct information is: | | | | |
| | | | Full name | | | Birth 3 | vear |
| | | | Present street address | | City | State | ZIP code |
| | | | | (| ` | | |
| | | | County | (Phone n |) umber | Email ac | ldress |
| | C | Other r | person (non-parent) who | receives c | hild support | Check one | |
| | Ο. | - | There is no non-parent wh | | | | |
| | | . , | There is a non-parent who | • | | | |
| | | | nu check (2) check a or b. | gets of illd s | support in this of | u3e. | |
| | | a. | The information about the | na othar narse | n who racaivas s | shild support is corr | act in the |
| | | a. | Application. | ic outer perso | on who receives e | ama support is corr | cet in the |
| | | | • If you check a skip to | 2. | | | |
| | | | • If paragraph 1C of th | ne Applicatio | n (form 301) is no | ot correct, check b | ınd fill in the blanks. |
| | | b. | The information about the Application. The correct | | | hild support is not | correct in the |
| | | \overline{Full} | name: first, middle, last | | | | th year |
| | | | • | | | | • |
| | | \overline{Pres} | sent street address | - City | | State | ZIP code |
| | | | | (|) | | |
| | | Cou | nty | Phone n | umber | Email ac | ldress |
| 2 | Ga | noral l | nformation about this | c Caca | | | |
| ۷. | | | | SCase | | | |
| | Α. | | child support order caph 2A of the Application (fo | 201) is 10 | at correct chack | h and fill in the bla | nalze |
| | | | e order entered <i>Check one</i> | nm 501) is n | oi correct, crieck | o ana jili in ine ola | TKS. |
| | | (1) Dali | ☐ The Application provide | s the correct | date of the child | d support order | |
| | | b. | ☐ The Application does no date is: | | | | rder. The correct |
| | | | | | | | |
| | | | Month | Day | Year | | |
| | | | | | | | |

| | (2) | Co | unty | and state where the order is entered Check one |
|----|-----|------|-------|---|
| | | a. | | The Application provides the correct county and state of the current child support order. |
| | | b. | | The Application does not provide the correct county and state of the current child support order. The correct county and state is: $ \frac{1}{2} \left(\frac{1}{2} \right) = \frac{1}{2} \left(\frac{1}{$ |
| | | | Coi | mty State |
| | (3) | Car | se ni | umber of the current child support order Check one |
| | (0) | a. | | The Application provides the correct case number of the current child support order. |
| | | b. | | The Application does not provide the correct case number of the current child support |
| | | D. | Ш | order. The correct case number is: |
| | | | | Case number |
| | (4) | Pei | reon | who pays child support Check one |
| | (¬) | a. | | The Application provides the correct name of the person who pays child support in this |
| | | a. | Ш | case. |
| | | b. | | The Application does not provide the correct name of the person who pays child support in this case. The correct name is: |
| | | | | Name: first, last |
| | (5) | Pei | rson | who receives child support Check one |
| | (-) | a. | | The Application provides the correct name of the person who receives child support in this case. |
| | | b. | | The Application does not provide the correct name of the person who receives child support in this case. The correct name is: |
| | | | | Name of Great Level |
| | (6) | Cui | rrant | Name: first, last amount of child support paid |
| | (0) | a. | | The Application provides the correct name of the person who receives child support in |
| | | u. | ш | this case. |
| | | b. | | The Application does not provide the correct name of the person who receives child support in this case. The correct amount is: |
| | | | | \$ per Amount Frequency |
| | | | | Amount Frequency |
| B. | Со | ру (| of cu | rrent child support order Check one |
| | (1) | | Αc | opy of the current child support order was attached to the Application. |
| | (2) | П | Ас | opy of the current child support order was not attached to the Application. |

| C. | Child S | Support Recovery Unit (CS | 3RU) Ched | ck one | ? | |
|----|----------|--|-------------------|--------|--|-----------------|
| | (1) | The Child Support Recover | y Unit (CSRU) | is in | volved in this case. | |
| | (2) | The Child Support Recover | y Unit (CSRU) | is no | ot involved in this case. | |
| D. | Collect | ion Services Center (CSC | Check one | ? | | |
| | (1) | The Collection Services Ce | nter (CSC) is i | nvolv | ed in this case. | |
| | | The CSC number is: | | | | |
| | (2) | The Collection Services Ce | | not in | volved in this case. | |
| E. | Other of | child support orders Ch | eck one | | | |
| | | There are no other child su | pport orders fo | r the | child or children involved | d in this case. |
| | (2) | There are other child suppo | ort orders for th | ne chi | ld or children involved in | this case. |
| | | They are: | | | | |
| | | Case Number | | Cou | ntv | State |
| | | Cuse Ivamoer | | Cou | ruy | siaie |
| | | Case Number | | Cou | nty | State |
| | | ☐ Check this box if you orders. | are attaching a | sepai | rate sheet listing additiona | l child support |
| F. | Childre | n covered by current child | support order | | Check one | |
| | (1) | The Application correctly id order. | entifies the chi | ldren | covered by the current of | child support |
| | (2) | The Application does not co support order. The followin | | | | |
| | | First, middle, & last initials of each child | Birth year | | First, middle, & last initials of each child | Birth year |
| | | (a) | | | (d) | |
| | | (b) | | | (e) | |
| | | (c) | | | (f) | 1 |
| | | I | 1 | | 1 | |

| G. | Αm | our | nt of | child support |
|----|-----|----------|--------|--|
| | (1) | Ju | /enile | e court order If you check a, check i or ii |
| | | a. | | It is correct that there is a juvenile court order that changed where the child or children were living. The person paying support has custody of the children. |
| | | | i. | ☐ The county and case number are correct in the Application. |
| | | | ii. | ☐ The county and case number are not correct in the Application. |
| | | | | If you check ii, provide the correct information below |
| | | | | The correct information is: |
| | | | | |
| | | | | County Case number |
| | | b. | | There is no juvenile court order that gives care of the child to the party paying support. |
| | (2) | Wh | o chi | ildren live with <i>Check</i> a <i>or</i> b |
| | | a. b. | | It is correct that one or more of the children now live with the person paying support. None of the children now live with the person who is ordered to pay support. |
| | (3) | Qu | alifyi | ing for child support Check a or b |
| | | a. | | It is correct that one or more of the children no longer qualify for child support. |
| | | b. | | There has been no change in the number of children who qualify for child support. |
| | (4) | Ар | plica | nt's income Check a or b |
| | | a. | | I agree that Applicant's income has gone down. |
| | | b. | | I do not agree that Applicant's income has gone down. |
| | (5) | Му | inco | ome Check a or b |
| | | a. | | I agree that my income has gone up. |
| | | b. | | I do not agree that my income has gone up. |
| | (6) | Му | res | ponse to Applicant's "other reason" for requesting a change in child support: |
| | | _ | | |
| | | _ | | |
| | | _ | | |
| | | | | |
| Н. | Ch | ild s | supp | port amount should be Check all that apply |
| | (1) | | Rai | sed Explain |
| | (2) | | Lov | wered Explain |
| | (3) | | Sto | pped Explain |
| | (4) | | Not | t be changed Explain |

| I. | Tax de | edu | ction for the children $Check(1) or(2)$ | |
|-------|-------------------|------|---|-----------------|
| | (1) | Th | ere is no court order at this time on tax deductions for the children. | |
| | (2) ☐ <i>If y</i> | | ere is a court order at this time on tax deductions. theck (2), check a or b: | |
| | a. | | A court order currently says who gets the tax deduction for the child or c should stay the same. | children and it |
| | b. | | A court order currently says who gets the tax deduction for the child or c should be changed. <i>Explain</i> | children and it |
| | | _ | | |
| | | _ | | |
| J. | Health | ca | re expenses for the children Check (1) or (2) | |
| | (1) | Th | ere is no court order at this time on who pays health care expense | s. |
| | (2) □ If y | | here is a court order at this time on who pays health care expenses wheck (2), $check$ a or b: | |
| | | a. | A court order currently says who pays for health care expenses for t children and it should stay the same. | the child or |
| | | b. | A court order currently says who pays for health care expenses and be changed. <i>Explain</i> | it should |
| | | | | |
| | | | | |
| K. | I (the c | the | r party) am Check each that is true | |
| 5.055 | | | the military service | |
| | (2) | In | prison or jail at in in | -: |
| L. | Protec | tive | or no contact order Check (1) or (2) | |
| | | | ere is neither a "protective order" nor a "no contact order" between me and A | pplicant. |
| | (2) | | ere is a "protective order" or "no contact order" between me and Applicant. ou check (2), fill in the following information: | |
| | | a. | County and state where the order came from: | |
| | | | County | State |
| | | b. | Court case number: | |

3. I (the other parent) deny anything in the Application that I have not agreed is correct.

4. My (the other parent's) Request

| I ask the court to: |
|--|
| Check all that apply. The court will only consider items that are checked. |
| (1) Dismiss the Application to Modify Child Support and leave child support as is. |
| (2) Raise the current child support payment. |
| (2) Lower the current child support payment. |
| (3) Stop payment of child support completely. |
| (4) Set child support for the parent who does not have the children. |
| (5) Change who gets the tax deduction for the child or children. |
| (6) Change who pays for health care expenses for the child or children. |
| (7) Order that Applicant pay the court fees. |
| (8) Order that Applicant pay my attorney fees. |
| (9) ☐ Other request: |

Continued on next page

| 5. A | ttori | ney Help | Check one | | | | | | |
|----------------|---------------------|--|------------------------|---|------------------|--|-----------|-----------------|---|
| Α | ۸. 🗆 | An attorney | did not hel | p me prepa | are or | fill in this paper. | | | |
| В | B. 🗌 | - | - | e prepare or fill in this paper. Il in the following information: | | | | | |
| | Name of attorney or | | ney or organi | zation, if any | , | Attorney's P.I.N. | # - Ask | the attori | ney |
| | | Business addr | ess of attorne | y or organiza | ation | City | | State | ZIP code |
| | | | | _ | | number – optional | - Attorn | ney 's ema | til address – option |
| С | heck I | ce Instruct A or B only if y I will accept | ou are filing i | n paper, not | electro | nically attorney's addres | ss listed | d above: | or |
| | | • | | | | ase at the mailing | | | |
| T_{i} | his do | cument, if filed | electronically | , will automa | atically | plicant is exempt fr be served on regist v that on | ered par | ties. | |
| ١, | Print | vour name | | | , cerui | by that on $\underline{\qquad\qquad}_{Month}$ | | \overline{Da} | , 20 v Year |
| _ | | f person to who | | | $\frac{1}{City}$ | | | State | ZIP code |
| | • | | | | City | | | State | zii couc |
| | | and Signat | | | | | | | |
| I, | | vour name | | | , have | read this Answ | er, and | I certify | under penalty |
| | f perj | | | | State | of lowa that the | e inform | nation I | have provided |
| | | | | 20 | | | | | |
| Si | igned (| on: Month | Day | Year | Your | signature* | | | |
| \overline{M} | lailing | address | | | City | | | State | ZIP code |
| (| 1 | | | ., ,, | | | 7 7 | . 7 7 7 7 | |
| _ | Wheth | number her filing electror he form after sig | nically or in pap | | | Add e your signature on t | | | ress – if available filing electronicall |
| | | | | Continu | ed on | next page | | | |

Important Notice

- See next page for instructions for filing an Answer.
- You must serve this Answer on the other parties.
- If the Child Support Recovery Unit (CSRU) is involved in this case, you must also serve the Answer on CSRU.
- See the Guide to Representing Yourself in a Child Support Modification Case in Iowa for information on serving papers.

Instructions for Rule 17.300-Form 315: Answer to Application to Modify Child Support

Do not file these instructions

Instructions for Filing an Answer to an Application to Modify Child Support

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

☐ Filing your Answer electronically

- If the Application was filed in a county that uses electronic filing, you must register to electronically
 file. For help with registration, see the eFiler's User Guide <u>How to Register Pro Se (Self Represented)</u>
 for eFiling on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you
 when you electronically file.)
- Log in to EDMS on the Iowa Judicial Branch website and file your Answer.
 The login page can be accessed from two different paths: you may <u>directly log in to EDMS</u>; or from the judicial branch website menu, you may select "eFiling > eFile (EDMS) Login."
- For help, see <u>How to eFile to an Existing Case</u>.
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling of
 your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My
 Filings, correct the error, and resubmit your Answer. For help, see <u>How to Resubmit a Returned Filing</u>.
- The NEF will indicate if your Applicant is exempt from electronic filing requirements, in which case, you
 must mail or serve in paper a copy of the document on Applicant if he or she does not have an attorney.

Filing your Answer in paper

- Make two photocopies of the original.
- If the Child Support Recovery Unit (CSRU) is involved in your child support modification case, you
 must also provide each form you file to the CSRU office that serves the county where your child
 support case is filed.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where
 the Application was filed. The county is listed at the top of the Application (form 301).
- The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- Keep one of the copies for your records.
- Serve one of the copies of your Answer on Applicant.
- You can hand one of the copies of the Answer form to Applicant, or mail a copy to Applicant spouse
 at the address shown on the Application.
- If Applicant has an attorney, you should serve the Answer by mailing a copy to the attorney at the attorney's address on the Application if box 5A on the Application is checked.

Do not file these instructions

February 2014

Rule 17.300—Form 316: General Answer to Application to Modify Child Support

The party served with an Application to Modify Child Support must file an Answer within **20 days** after receiving the Application and Original Notice, or the **court may enter a judgment against that party** giving Applicant what he or she asked for in the Application.

If the Application you received is on form 301, use form 315 for your Answer.

Read the Guide to Representing Yourself in a Child Support Modification Case in Iowa on the Iowa Judicial Branch website before using this form.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure (311).
- If filing in paper, you may use form 311 to provide any protected information in full.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| | e Iowa District Court for | County | | | | |
|-------|--|---|--|--|--|--|
| | | County where Application is filed | | | | |
| Upoi | n the Petition of | Equity case no. | | | | |
| | ioner ne of Petitioner as it is in the Application | General Answer to Application to Modify Child Support | | | | |
| and c | concerning | | | | | |
| | Dondent ne of Respondent as it is in the Application | | | | | |
| 1. A | nswer | | | | | |
| Α | . I admit that the following paragraph List the numbers of the paragraphs in the A | Application that you think are true. If you decide later that the | | | | |
| | paragraphs you list here are not true, it m | ay be too late to change your answer. | | | | |
| В | paragraphs you list here are not true, it me. I deny that the following paragraph List the numbers of the paragraphs in the App | s in the Application are true: | | | | |

Rule 17.300—Form 316: General Answer to Application to Modify Child Support, continued

D. I deny anything in the Application that is not admitted in this Answer.

E. Other information:

2. Request If you do not know what you want, talk to an attorney.

I ask the court to: Write here what you would like the court to do. For example, tell the court if you want the amount of child support you pay or receive to stay the same. Be brief. Do not write long descriptions.

3. Attorney Help Check one

- A.

 An attorney did not help me prepare or fill in this paper.
- B.

 An attorney helped me prepare or fill in this paper.

If you check B, you must fill in the following information:

4. Service Instructions

If the party answering the Application is filing in paper Check one

- A. \square | will accept service of documents at the attorney's address listed above; or

Continued on next page

| 1. | | , certify that on | | , 20 | | |
|--|--------------------------|---|-----------------|--------------|--|--|
| Print your name | | Month | | Year | | |
| I mailed or gave a copy of | this Answer to | Applicant or Applicant's | attorney at t | his address | | |
| Name of person to whom I deliv | vered or mailed it | | | | | |
| Party's or attorney's mailing ac | ddress | City | State | ZIP code | | |
| Oath and Signature | | | | | | |
| | | la a vica i una a al Alada A A a a vivia in i | بطناهما المسادي | | | |
| I, | | , nave read this Answer, a | and I certify | under pena | | |
| Print your name of perjury and pursuant to in this Answer is true and | the laws of the | | | | | |
| Print your name of perjury and pursuant to in this Answer is true and | the laws of the correct. | State of lowa that the inf | | | | |
| Print your name of perjury and pursuant to | the laws of the | | | | | |
| Print your name of perjury and pursuant to in this Answer is true and | the laws of the correct. | State of lowa that the inf | | | | |
| Print your name of perjury and pursuant to in this Answer is true and Signed on: Month Day | the laws of the correct. | State of lowa that the inf Your signature* | ormation I h | nave provide | | |

Important Notice

- · See next page for instructions for filing an Answer.
- You must serve this Answer on the other parties.
- If the Child Support Recovery Unit (CSRU) is involved in this case, you
 must also serve the Answer on CSRU.
- See the Guide to Representing Yourself in a Child Support Modification Case in Iowa for information on serving papers.

Rule 17.300—Form 316: General Answer to Application to Modify Child Support

Do not file these instructions

Instructions for Filing an Answer to an Application to Modify Child Support

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

■ Filing your Answer electronically

- If the Application was filed in a county that uses electronic filing, you must register to electronically
 file. For help with registration, see the eFiler's User Guide <u>How to Register Pro Se (Self Represented)</u>
 for eFiling on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you
 when you electronically file.)
- Log in to EDMS on the Iowa Judicial Branch website and file your Answer.
 The login page can be accessed from two different paths: you may <u>directly log in to EDMS</u>; or from the judicial branch website menu, you may select "eFiling > eFile (EDMS) Login."
- For help, see <u>How to eFile to an Existing Case</u>.
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling of
 your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My
 Filings, correct the error, and resubmit your Answer. For help, see <u>How to Resubmit a Returned Filing</u>.
- The NEF will indicate if your Applicant is exempt from electronic filing requirements, in which case, you
 must mail or serve in paper a copy of the document on Applicant if he or she does not have an attorney.

Filing your Answer in paper

- Make two photocopies of the original.
- If the Child Support Recovery Unit (CSRU) is involved in your child support modification case, you
 must also provide each form you file to the CSRU office that serves the county where your child
 support case is filed.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where
 the Application was filed. The county is listed at the top of the Application (form 301).
- The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- Keep one of the copies for your records.
- Serve one of the copies of your Answer on Applicant.
- You can hand one of the copies of the Answer form to Applicant, or mail a copy to Applicant spouse
 at the address shown on the Application.
- If Applicant has an attorney, you should serve the Answer by mailing a copy to the attorney at the
 attorney's address.

Do not file these instructions

February 2014

Instructions for Rule 17.300-Form 316

Page 1 of 1

[Court Order June 17, 2008; March 6, 2014]

Forms 317 to 321: Reserved

Rule 17.300—Form 322: Motion in a Child Support Modification

Use this form if you want to ask the court to do something after your court case has already started. If you do not understand how to use this form, or if you should use this form, talk to an attorney. In the Iowa District Court for _____ County County where the Application is filed Upon the Petition of Equity case no. __ **Motion in a Child Support** Petitioner Modification Full name of Petitioner as it is in the Application and concerning Respondent Full name of Respondent as it is in the Application l am Check each that applies A. Detitioner B. Respondent C. Applicant 1. Request A. I ask the court to Check all that apply. If you check any box in A, you must tell the court why you are making this request in B. (1) Change the hearing date that has been set for Month (2) Set a hearing date for modification of child support. (3) Other request Explain ___ B. I am making the request(s) in this Motion because: _____

Rule 17.300—Form 322: Motion in a Child Support Modification, continued

| 2. | Attorney Help Check one | | | | | | |
|----|--|----------------------|-------------------------------|----------------------|------------------------|--|--|
| | A. An attorney did not h | eln me nrenare | or fill in this naner | | | | |
| | B. An attorney helped n | ne prepare or fi | or fill in this paper. | | | | |
| | ij you oncon D, you musi, | | s ingormation. | | | | |
| | Name of attorney or orgo | anization, if any | Attorney's P.I.N. | # – Ask the attorn | пеу | | |
| | Business address of attor | ney or organizatio | on City | State | ZIP code | | |
| | ()_ Attorney's phone number | (| _) s fax number – optional | Attorney's ema | il address – optional | | |
| 3. | Certification of Service Section 3 to be completed only if filing. | îling in paper or if | the Applicant or the ot | | t from electronic | | |
| | This document, if filed electronica | | , | • | | | |
| | I, | , c | ertify that on | | , 20 , Year | | |
| | I mailed or gave a copy of th | | | • | | | |
| | Name of person to whom I deliver Party's or attorney's mailing add | | City | State | ZIP code | | |
| 4. | Oath and Signature | | | | | | |
| | I, | c | ertify under penalty | of periury and p | ursuant to the | | |
| | Print your name | | | | | | |
| | laws of the State of Iowa that this Motion is true and correc | t. | | information I ha | ave provided in | | |
| | Signed on: Month Day | | Your signature* | | | | |
| | Mailing address | | City | State | ZIP code | | |
| | Phone number | Email address | Add | litional email addi | ess – if available | | |
| | * Whether filing electronically or in p scan the form after signing it and th | | | his form. If you are | filing electronically, | | |
| | | | | | | | |

Rule 17.300—Form 323: Response to a Motion in a Child Support Modification

Use this form if your spouse has filed a Motion (most likely form 322) and you disagree with what your spouse is asking the court to do in that Motion.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the Iowa District Court for | County where the Application is filed |
|--|--|
| Upon the Petition of | Equity case no |
| Petitioner Full name of Petitioner as it is in the Application | Response to a Motion in a Child Support Modification |
| and concerning | |
| Respondent Full name of Respondent as it is in the Application | - |
| am | |
| Check each that applies A. ☐ Petitioner | |
| _ | |
| B. Respondent | |
| C. ☐ Applicant 1. Motion | |
| The other party filed a Motion on | , 20 |
| 2. Response Check A or B. | |
| A. 🗌 I agree with the Motion. | |
| B. I disagree with the request(s) in the | ne Motion because: Explain |
| | |
| | |
| - | |
| | |
| | |
| | |
| | |
| Continue | ed on next page |

Rule 17.300—Form 323: Response to a Motion in a Child Support Modification, continued

| | An attorney An attorney If you check B | helped me | prepare o | are or fill in this par fill in this paper. ving information: | aper. | | |
|------------------|---|--|--|---|--|--|---|
| | An attorney If you check B Name of attorn | helped me | prepare o | r fill in this paper. | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| | | ney or organi | zation, if any | | | | |
| | Business addr | | | Attorney's P.I. | N. # - Ask | the attorney | y |
| | | ess of attorne | y or organiz | ation City | | State | ZIP code |
| | () _ Attorney's pho | one number | (| ey's fax number – opti | onal Atto | rney's ema | til address – option |
| ection iling. | 4 to be complet | ted only if filir | ng in paper o | or if Applicant or the o | | | om electronic |
| | | | | - | _ | | 20 |
| Print | vour name | | | , certify that on $\underline{}$ | onth | | , 20 |
| arty's | or attorney's m | ailing addres | :S | City | | State | ZIP code |
| Dath a | and Signat | ure | | | | | |
| , | | | | , certify under per | alty of perj | ury and p | oursuant to the |
| n this I | Response is t | true and cor | rect. | · | that the in | formation | I have provide |
| igned o | n: Month | Day | Year | Your signature* | | | |
| Mailing address | | | | City | | State | ZIP code |
| hone n |) umber | Em | nail address | | Additional | email addi | ress – if available |
| | υ υ | | | | e on this form | . If you are | filing electronically |
| | Printy mailed ther p Tame of arty's of a this figned of this filter p The thore is the the this filter p The this filter p | ection 4 to be completeding. This document, if filed Print your name mailed or gave a control of the party's attorned arty's or attorney's management of the State of the Stat | ection 4 to be completed only if filtifications. This document, if filed electronically are mailed or gave a copy of this other party's attorney at the action of person to whom I delivered arty's or attorney's mailing address. Dath and Signature aws of the State of lowa that I I in this Response is true and continued in the party's mailing address. Thone number Entrone when I in the party is a party in party i | dection 4 to be completed only if filing in paper of ling. This document, if filed electronically, will automorphis document, if filed electronically or in paper, you must if the filing electronically or in paper. | This document, if filed electronically, will automatically be served on a print your name and a copy of this Response to Applicant or the other party's attorney at the address below: Tame of person to whom I delivered or mailed it Tarty's or attorney's mailing address City Dath and Signature This Response is true and correct. This Response is true and correct. The party is a certify under pendant in this Response is true and correct. The party is a certify under pendant in this Response is true and correct. The party is a certify under pendant in this Response is true and correct. The party is a certify under pendant in this Response is true and correct. The party is a certify under pendant in this Response is true and correct. The party is a certify under pendant in this Response is true and correct. The party is a certify that on and in the party is a certify that on a certification and the certi | ection 4 to be completed only if filing in paper or if Applicant or the other party is ling. This document, if filed electronically, will automatically be served on registered party is ling. Print your name mailed or gave a copy of this Response to Applicant or the other party at the party's attorney at the address below: Tame of person to whom I delivered or mailed it Party's or attorney's mailing address City Dath and Signature | ection 4 to be completed only if filing in paper or if Applicant or the other party is exempt friling. This document, if filed electronically, will automatically be served on registered parties. The print your name registered parties. The |

Caution: This form may require you to provide protected or sensitive information. Each party must complete one of these forms. If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure (311) if you have not already done so. If filing in paper, you may use form 311 to provide any protected information in full if you have not already done so. If you do not understand how to use this form, or if you should use this form, talk to an attorney. In the Iowa District Court for _ County County where the Application is filed **Upon the Petition of** Equity case no. Child Support **Petitioner Modification Financial** Full name of Petitioner as it is in the Application Statement and concerning Respondent Full name of Respondent as it is in the Application I am Check each that applies A.

Petitioner B. Respondent C. Applicant ____, state that this is a true and complete statement of my assets, debts, and present income as of the ____day of _____ 1. My Income *How often is income paid? $W = Weekly \ B = Bi$ -weekly (every other week) $M = Monthly \ T = Two times a month$

| A. Current income from employment | Gross Ir | ncome | Net Income | | |
|--|----------------------|---------------------------------|----------------------|---------------------------|--|
| and other sources Sources of income, not required to list name of employer | How often?* W,B,M,T | Gross amount Before taxes | How often?* W,B,M,T | Net Amount After taxes | |
| (1) Wages from employer Job: Title: | | \$ | | \$ | |
| (2) Wages from employer Job: Title: | | \$ | | \$ | |
| (3) Other income Describe source: | | \$ | | \$ | |

| (4) Other income Describe source: | | \$ | \$ |
|--|-----|-----------------------|---------------------|
| (5) Other income Describe source: | | \$ | \$ |
| Total gross and net income from employment and other sources | | \$ Gross income total | \$ Net income total |
| B. Deductions allowed for child support calculations | | | |
| Tax status | Yes | No | |
| I am currently married to the other parent <i>Check Yes or No</i> | | | |
| I have custody of the children in this case <i>Check Yes or No</i> | | | |
| (1) Number of exemptions | | | |
| Yourself Guidelines allow one exemption for parent | 1 | | |
| Children | | | |
| (2) Income tax withheld Federal | | | \$ |
| State | | | \$ |
| (3) FICA Social Security & Medicare | | | \$ |
| (4) Mandatory pension contribution | | | \$ |
| (5) Mandatory occupational license fees | | | \$ |
| (6) Union dues | | | \$ |
| (7) Prior court-ordered child support Paid to: | | | \$ |
| Paid to: | | | \$ |
| Paid to: | | | \$ |
| (8) Prior court-ordered medical support Paid to: | | | \$ |
| Paid to: | | | \$ |
| Paid to: | | | \$ |

| | (9 | (a | ior co limor aid to: | • / | ort | | | | \$ | |
|----|---|------|----------------------------|--|--------------|-----------------------------------|-----------------------------------|---------------|---------------|---------|
| | (1 | | | l child care expenses due yment <i>custodial parent onl</i> y | | | | | \$ | |
| | T | otal | dedu | ctions | | | | | \$ | |
| | | C | heck: | this box if you have attached | a sheet with | additional info | ormation on your in | come and de | ductions. | |
| 2. | So | cia | l Se | curity Disability (| SSD): | | | | | |
| | Α. | SS | D b | enefits paid to you | | | | | | |
| | | (1) | Am | ount paid for your expe | nses | | \$ | | per | month |
| | | (2) | Ber | nefit paid for each child | in your ho | me | \$ | per | month | |
| | | | a. | Number of children red | eiving ber | nefits | c | hildren | | |
| | | | b. | List the children in you | r home wh | no receive SS | SD benefits Usa | e initials on | ly | |
| | First, middle, & last initials of each child Birth year | | | | ar | First, middle, 8 initials of each | | Birth year | | |
| | | | | i. | | | iv. | | | |
| | | | | ii. | | | v. | | | |
| | | | | iii. | | | vi. | | | |
| | | | | Check this box if you and receive Social S | | | sting additional c | hildren who | live in you | r home |
| | В. | Ве | nefit | ts paid to other perso | n children | are living v | with | | | |
| | | (1) | Ber | nefit paid for each child | in other pe | erson's home | \$ | | per | month |
| | | (2) | Nur | mber of children receivi | ng benefits | 3 | children | | | |
| | | (3) | | the children who receivinitials only: | ve SSD be | nefits but live | e with someone | other than | ı you. | |
| | | | | First, middle, & last initials of each child | Birth yea | ar | First, middle, 8 initials of each | | Birth year | |
| | | | | i. | | | iv. | | | |
| | | | | ii. | | | v. | | | |
| | | | | iii. | | | vi. | | | |
| | | | | Check this box if you home and receive So | | | | hildren who | o do not live | in your |

3. Qualified additional dependent deduction

- List the initials and birth year of each child you are the legal parent of.
- Do not include any children covered by the child support order involved in this case.

| First, middle, & last initials of each child | Birth year | First, middle, & last initials of each child | Birth year | | |
|--|------------|--|------------|--|--|
| (1) | | (4) | | | |
| (2) | | (5) | | | |
| (3) | | (6) | | | |

Check this box if you have attached a sheet listing additional children for the qualified additional dependent deduction.

| 4. Extraordinary visitation For noncustodial p | parent on | ly |
|--|-----------|----|
|--|-----------|----|

| If this i | (1) Number of court-ordered overnights in a year If this number exceeds 127 days per year, provide a copy of the court order containing the visitor provisions. | | | | | | | |
|-----------|--|--|--|--|--|--|--|--|
| (2) Physi | cal care | | | | | | | |
| а. 🗌 | The court ordered equally shared physical care for the children. If the court ordered equally shared physical care for the children, the extraordinary visitation credit does not apply. | | | | | | | |
| b. 🗌 | The court did not order equally shared physical care for the children. | | | | | | | |

Continued on next page

5. Assets Things you own.

A. Real estate

| Property Address | Purchase Price | Debt Total amount you still owe on it |
|------------------|----------------|--|
| (1) | \$ | ↔ |
| (2) | \$ | \$ |

B. Vehicles

Includes cars, trucks, motorcycles, and other motorized vehicles.

| Make Make (e.g. Ford) | Year | Market value What it would sell for |
|--------------------------|------|--|
| (1) | | \$ |
| (2) | | \$ |
| (3) | | \$ |

| ı | - 1 | Check i | this b | ox it | vou i | have | attach | ed a | sheet | with | addition | ıl in | formation | on of | her ve | hicles | ₹. |
|---|-----|----------|--------|-------|---|-------|---------------|------|--------|---------|--------------------|-------|-------------|--------|---|---|----|
| L | _ | CITO CIO | 11000 | 000 0 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 10110 | or ce ce ce e | 000 | 511000 | ,, reit | Ce Ceccette C / Ic | | 70111100000 | 0/1 01 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ٠. |

| \mathbf{c} | Securities. | stacks | ጲ | honds |
|--------------|-------------|---------|---|--------|
| ◡. | oecuniles. | SIUCKS. | œ | DUITUS |

| Current value of: | |
|-------------------|----|
| (1) Stocks | \$ |
| (2) Bonds | \$ |

D. Life insurance *Owner: P = Petitioner R = Respondent J = Joint (Both)

| Life insurance Company name | Owner* | Cash value Not death benefit | Loan from cash value Total amount still owed on loan | Cash value Minus loan owed |
|--------------------------------|--------|---------------------------------|---|----------------------------------|
| (1) | | \$ | \$ | \$ |
| (2) | | \$ | \$ | \$ |
| (3) | | \$ | \$ | \$ |

Check this box if you have attached a sheet with additional information on life insurance.

E. Bank accounts

| Checking and savings accounts Bank or Credit Union name If you do not use bank accounts, write "Cash" | Account type Checking or Savings | Net value Cash value minus loan / overdraft owed |
|---|-------------------------------------|---|
| (1) | | \$ |
| (2) | | \$ |
| (3) | | \$ |

Check this box if you have attached a sheet with additional information on other checking and savings accounts.

F. Other assets

Items not listed in the other boxes should be listed here. For example: jewelry, furs, guns, sporting goods, farm animals.

*Owner: P = Petitioner R = Respondent J = Joint (Both)

| Other assets Describe | Owner* P,R,J | Market value What it would sell for | Debt Total amount you still owe on it and to whom owed | Net value Market value minus debt owed |
|-----------------------|-----------------|---|--|--|
| (1) | | \$ | \$ to: | \$ |
| (2) | | \$ | \$ | \$ |
| | | | to: | |
| (3) | | \$ | to: | \$ |

Check this box if you have attached a sheet with additional information on other assets.

6. Expenses

A. My expenses

List your living expenses

*How often paid?: $W = Weekly \ B = Bi$ -weekly (every other week) M = Monthly T = Two times a month A = Annually

| Type of expense | Paid to | How often paid?* W,B,M,T,A | Monthly payment |
|--|---------|----------------------------|--------------------|
| (1) House payment or rent | | | \$ |
| (2) Food At home & restaurants | | | \$ |
| (3) Transportation (gas, bus fare) Not car loan payments – see (12). | | | \$ |
| (4) Clothing | | | \$ |

| (5) Medical, dental Not health insurance payments – see (10). | | \$ |
|---|---|----|
| (6) Utilities (gas, electric) | | \$ |
| (7) Phone | | \$ |
| (8) Cable / satellite television / internet | | \$ |
| (9) Car insurance payment | | \$ |
| (10) Health insurance payment | | \$ |
| (11) Credit card payments | | \$ |
| (12) Car loan payments | | \$ |
| (13) Other loan payments | | \$ |
| (14) Other expense Identify: | | \$ |
| (15) Other expense Identify: | | \$ |
| (16) Other expense Identify: | | \$ |
| (17) Totals from attached sheets, if any | · | |
| Check this box if you have attached a sheet with additional information on your expenses. | | \$ |
| Total expenses | | \$ |

7. My debts Debts may include things such as past due balances on utilities, money owed to a landlord for damages after moving, credit card debt, and loans from friends, family, or banks.

*How often paid?: W = Weekly B = Bi-weekly (every other week) M = Monthly T = Two times a month A = Annually

| Payable to | Item or service | Amount | How often paid?* W,B,M,T,A | Balance Due |
|--|--------------------|--------|----------------------------|-------------|
| A. | | | | \$ |
| В. | | | | \$ |
| C. | | | | \$ |
| D. | | | | \$ |
| E. Totals from attached sheets, if any | | | | \$ |

| Check this box if you have attached a sheet with additional information on other debts, and enter the total. | | |
|--|--|---|
| Total other debts | | |
| Including amounts shown on attached | | _ |

8. Current spouse's income

- List your current spouse's information.
- This information will not be used to determine child support obligations.

 $W = Weekly \ B = Bi$ -weekly (every other week) $M = Monthly \ T = Two times a month$

| A. Current income from employment | Gross II | ncome | Net In | come |
|--|----------------------|---------------------------------|----------------------|---------------------------|
| and other sources Sources of income, not required to list name of employer | How often?* W,B,M,T | Gross amount Before taxes | How often?* W,B,M,T | Net Amount After taxes |
| (1) Wages from employer Job: Title: | | \$ | | \$ |
| (2) Wages from employer Job: Title: | | \$ | | \$ |
| (3) Other income Describe source: | | \$ | | \$ |
| (4) Other income Describe source: | | \$ | | \$ |
| Total gross and net income from employment and other sources | | \$ Gross income total | | \$ Net income total |

9. Attorney Help

| Che | eck o | one | | | | |
|-----|---|--|---|-------------|----------------------|--|
| A. | | An attorney did not help me prepare or fill in this paper. | | | | |
| В. | | ☐ An attorney helped me prepare or fill in this paper. | | | | |
| | If you check B, you must fill in the following information: | | | | | |
| | | | | | | |
| | | Name of attorney or organization, if any | Attorney's P.I.N. $\#$ – Ask the attorney | | | |
| | | | | | | |
| | | Business address of attorney or organization | City | State | ZIP code | |
| | | | | | | |
| | | Attorney's phone number Attorney's fax | c number – optional Atto | orney's ema | il address – optiona | |

^{*}How often is income received?

10. Certification of Service by Mailing or Delivery

| ', | | _, certify that on <i>Month</i> | | , 20 |
|---|---------------------------|---|-----------------|---------------|
| Print your name | | Month | Day | y Year |
| _ | | pport Modification Finan ther party's attorney at t | | |
| Name of person to whon | n I delivered or mailed i | . | | |
| Party's or attorney's ma | uiling address | City | State | ZIP code |
| Oath and Signatu | ıre | | | |
| I | | _, certify under penalty of | f perjury and p | ursuant to th |
| Print your name | | | | |
| Print your name aws of the State of lo | | this Child Support Modifi n this Statement is true a | | al Statement |
| Print your name laws of the State of lo | ion I have provided i | n this Statement is true a | | al Statement |
| Print your name laws of the State of lo | ion I have provided i | | | al Statement |
| Print your name laws of the State of loand that the information | ion I have provided i | n this Statement is true a | | al Statement |

^{*} Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.

Rule 17.300—Form 325: Affidavit of Mailing Notice

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the Iowa District Court for | nty where the Application is filed |
|--|---|
| Upon the Petition of | Equity case no |
| Petitioner Full name of Petitioner as it is in the original case | Affidavit of Mailing Notice |
| and concerning | |
| Respondent Full name of Respondent as it is on the Application | |
| 1. Attorney Help Check one A. An attorney did not help me prepare B. An attorney helped me prepare or fill If you check B, you must fill in the following Name of attorney or organization, if any Business address of attorney or organization (| in this paper. information: Attorney's P.I.N. # - Ask the attorney |

Important Notice

A party **must** file this Affidavit with the clerk of court if he or she asks the court for a default Decree for modification of child support. The party **must** also complete the oath and signature section on the next page.

Oath and Signature on next page

Rule 17.300—Form 325: Affidavit of Mailing Notice, continued

| Oath and Signature | | | |
|---|---------------------------------|-------------------------|-----------------|
| I, | _ , certify under penalty of | perjury and p | oursuant to the |
| Print your name | | | |
| laws of the State of lowa that on the | Day day of, | 20, I se <i>Year</i> | ent by ordinary |
| mail with proper postage, the following | g paper or papers: | | |
| Check one | | | |
| Notice of Intent to File a Written Al support, or | oplication for Default Decree f | or modification | n of child |
| Other document (describe): | | | |
| to the other party's last-known addres | s below. | | |
| Other party's street address | City | State | ZIP code |
| Signed on: Month Day Year | Applicant's signature* | | |
| | | | |
| Mailing address | City | State | ZIP code |
| | | | |
| () | | | |

^{*} Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.

Rule 17.300—Form 326: Notice of Intent to File Written Application for Default Decree

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

| In the Iowa District Co | | | | County |
|--|---|---|---------------|----------------|
| | (| County where your case is filed | | |
| Upon the Petition of Petitioner Full name of Petitioner as it is in the original case | | Equity case no | | |
| | | Notice of Intent to File Writte Application for Default Decre | | |
| and concerning | | | | |
| Respondent Full name of Respondent as it is in the | ne Application | | | |
| To party receiving thi | s Notice: | | | |
| First name | Middle name | Last name | | |
| Date of Notice: | | 20 | | |
| Month | ,, | 20 Year | | |
| Handwritten signature of part or attorney if filing in paper The person who provided the | | r Electronic signature of poor attorney if filing electrons the information below. | | his Notice |
| Present street address (If | attorney, firm address) | City | . State | ZIP code |
| () | | | | |
| Phone number | Email add | dress | | |
| Instructions for party filing. Filing your Notice | - | | | |
| 0 . | • | ing this Notice unless that party i | s exempt fi | rom electronic |
| Filing your Notice | in paper (if you have rec | eived permission from the court | to file in pa | aper) |
| Complete form 32 | 25 and file the original at the f this form (326) at the cler | ving this Notice by mail or in per the clerk of court's office. rk of court's office. | rson. | |
| February 2014 | Rule 17 | .300—Form 326 | | Page 1 of 1 |

Rule 17.300—Form 327: Request for Relief in a Child Support Modification

- The other party did not file an Answer (315), or
- The other party will not work with you to prepare a Settlement Agreement (328).

Caution: This form may require you to provide protected or sensitive information.

- 🖳 If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure (311) if you have not already done so.
- [in the contraction of the contr

| County where Appl | ligation is filed | |
|------------------------------------|--|--|
| , | iication is jitea | |
| Equity cas | se no | |
| S | | |
| | T la sua hann saca | |
| ay leave your street address, phon | e number, and email l | hlank. |
| | | |
| th year | | |
| City | State | ZIP code |
| Phone number | Email a | ddress |
| n: <u>Birth year</u> | | |
| eddress City | State | ZIP code |
| | Requision In all information that you know. any leave your street address, phone City City Phone number n: Birth year | th year City Phone number Email a Birth year |

 $Rule\ 17.300 — Form\ 327: \textit{Request for Relief in a Child Support Modification}, continued$

| D. | Other p | person (non-parent) who re- | ceives child suppo | ort: Birth year | _ | |
|-----|---------|--|-----------------------|---------------------------------|----------------------|-------------------|
| | Fullr | name: first, middle, last | | | | |
| | Prese | nt street address | City | | State | ZIP code |
| | Coun | ty | () Phone numbe | er | Email a | ddress |
| . R | equest | for Relief | | | | |
| Α. | Child s | support ach that is true, and fill in the | e blanks for the iten | ns you check. | | |
| | (1) | Child support should be rai | ised from \$ | per r | nonth to \$_ | |
| | | per month, beginning | | | Year for | . |
| | | First, middle, & last initials of each child | Birth year | First, middle initials of ea | | Birth year |
| | | a. | | d. | | |
| | | b. | | e. | | |
| | | c. | | f. | | |
| | | Check this box if you ha | we attached a sepa | rate sheet listing ac | dditional ch | ildren. |
| | (2) | Child support should be lo | wered from \$ | per r | month to \$_ | |
| | | per month beginning | th | | $\frac{1}{Year}$ for | . |
| | | First, middle, & last initials of each child | Birth year | First, middle initials of ea | | Birth year |
| | | a. | | d. | | |
| | | b. | | e. | | |
| | | c. | | f. | | |
| | | Check this box if you ha | we attached a sepa | rate sheet listing ac | dditional ch | ildren. |
| | (3) | Check here if you want chil amount. If you check this, w | | | | Support Guideline |
| | | | per mo | | | |

Rule 17.300—Form 327: Request for Relief in a Child Support Modification, continued b. Child support should be different than the Guidelines amount because: (4) Child support should be **stopped** beginning on the Day Month First, middle, & last First, middle, & last Birth year Birth year initials of each child initials of each child d. a. b. e. f. C. Check this box if you have attached a separate sheet listing additional children. B. Tax deduction for the children Check(1) or(2)(1) There is no court order at this time on tax deductions. (2) There is a court order at this time on tax deductions. If you check (2), check a or b: A court order currently says who gets the tax deduction for the child or children and it should stay the same. b.

A court order currently says who gets the tax deduction for the child or children and it should be changed as set forth in the table below. Explain First, middle, & last Person who should now claim child for Birth year initials of each child tax deduction ii. iii. ί٧. ٧.

☐ Check this box if you have attached a separate sheet listing additional children.

Rule 17.300—Form 327: Request for Relief in a Child Support Modification, continued

| C. | Health Check (| | | ice or cash medical su | ıpport | | | | | | | | |
|----|---|-------|---------------|--|-----------------------------|--|--|--|--|--|--|--|--|
| | (1) There is no court order at this time on who pays health insurance or cash medical support. | | | | | | | | | | | | |
| | (2) 🗆 | | ere i opor | | time on who pays | s health insurance or cash medical | | | | | | | |
| | <i>If y</i> | ou c | heck (| (2), <i>check</i> a <i>or</i> b | | | | | | | | | |
| | | a. | | A court order currently schildren and it should st | | nealth care expenses for the child or | | | | | | | |
| | | b. | | A court order currently s be changed as set forth | | nealth care expenses and it should Explain | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | First, middle, & last initials of each child | Birth year | Parent who should now provide health insurance or cash medical support | | | | | | | |
| | | | | i. | | | | | | | | | |
| | | | | ii. | | | | | | | | | |
| | | | | iii. | | | | | | | | | |
| | | | | iv. | | | | | | | | | |
| | | | | V. | | | | | | | | | |
| | | | | ☐ Check this box if you | are attaching a sepa | rate sheet listing additional children. | | | | | | | |
| | (3) Ish | noul | d pay | / % | of the out-of-pocket | health care expenses. | | | | | | | |
| | | e oth | | arent should pay % | o | f the out-of-pocket health care | | | | | | | |
| | (5) Ish | noul | d pay | / %i | in cash medical sup | port. | | | | | | | |
| | (6) Th | e oth | ner p | arent should pay % | ir | n cash medical support. | | | | | | | |
| D. | Court I | ne | | | | | | | | | | | |
| | (1) | | | t fees should be paid by | | | | | | | | | |
| | (2) | | | t fees should be paid by | · | and the second for | | | | | | | |
| | (3) | | | er parent and I should p | • | • | | | | | | | |
| | (4) | ın | e otn | er parent and I should p | ay one-nair or the t | otal court rees. | | | | | | | |

Rule 17.300—Form 327: Request for Relief in a Child Support Modification, continued

| | Check on | y's Fees | |
|----|---------------------|---|---|
| | | | |
| | (1) My a | attorney's fees | |
| | a. | ☐ I have no attorney's fees. | |
| | b. | ☐ I will pay my own attorney's fees. | |
| | C. | ☐ I ask that the other party pay \$ | for my attorney's fees. |
| 3. | Necessar | ry Documents | |
| | | he court require each of us to sign and de | |
| | be needed | to carry out the terms of the Decree Mod | difying Child Support. |
| 4. | Other Red | quest for Relief Attach additional sheets if | necessary |
| | | | • |
| | | | |
| | | | |
| | | | |
| | | | |
| 5 | Statemen | nts of Understanding and Fact | |
| 5. | Statemen Check each | nts of Understanding and Fact that applies | |
| 5. | Check each | _ | e court. |
| 5. | Check each a. | that applies | |
| 5. | Check each a. | that applies ve made a full disclosure of my income to the | ne Application to Modify Child Support. |

Continued on next page

 $Rule\ 17.300 — Form\ 327: \textit{Request for Relief in a Child Support Modification}, continued$

| 7. Ce Sect filing This I, Pi | rtification of S tion 7 to be complet | helped me ou must fill in ney or organiz ess of attorney one number Service by ted only if filin electronically, | prepare of the following zation, if any y or organiz Attorn Mailing ag in paper of the will automatical automati | or fill in this g information Atta ation City aey's fax num or Delive or if Applican | paper. n: orney's P.I.N. ber - optional ry t or the other proced on register | # — Ask the atto State Attorney's en party is exempt j | ZIP code nail address – optiona from electronic |
|---|--|--|--|--|---|---|---|
| 7. Ce Sect filin This I, _P I ma | An attorney If you check (2), you Name of attorn Business addr ()_ Attorney's pho existing 7 to be completed by the com | helped me ou must fill in ney or organiz ess of attorney one number Service by ted only if filin electronically, | prepare of the following zation, if any y or organiz Attorn Mailing ag in paper of the will automatical automati | or fill in this g information Atta ation City aey's fax num or Delive or if Applican | paper. n: orney's P.I.N. ber - optional ry t or the other proced on register | # — Ask the atto State Attorney's en party is exempt j | ZIP code nail address – optiona from electronic |
| Sect filing This I, Pi I mand other | Business addr ()_ Attorney's pho ertification of Stion 7 to be completing. s document, if filed a erint your name hailed or gave a compared | ess of attorney one number Service by ted only if filin | y or organiz Attorn Mailing ig in paper of | ation City or Selive or Delive or if Applicant atically he se | v ber – optional ry t or the other process on register. | State Attorney's en party is exempt j | ZIP code nail address – optiona from electronic |
| Sect filing This I, Pi I mand other | Attorney's photein of Stion 7 to be completed as document, if filed are in the print your name alled or gave a control of the print your name are in the pri | one number Service by ted only if filin electronically, | Attorn Mailing in paper of |) ney's fax num or Delive or if Applican atically be se | ber-optional ry t or the other productions | Attorney's en party is exempt j | nail address – optiona from electronic |
| Sect filing This I, Pi I mand other | rtification of Stion 7 to be completing. s document, if filed frint your name mailed or gave a control of the state of the | Service by ted only if filin electronically, | Mailing og in paper o | or Delive or if Applican atically he se | ry t or the other _i | party is exempt j | from electronic |
| Sect filing This I, I man othe | rtification of Stion 7 to be completing. s document, if filed frint your name mailed or gave a control of the state of the | Service by ted only if filin electronically, | Mailing og in paper o | or Delive or if Applican atically he se | ry t or the other _i | party is exempt j | from electronic |
| l ma | ailed or gave a | | | | 3.64- | Γ | Vo. sur |
| l ma | ailed or gave a | | | _, oorany an | | | , |
| l ma | ailed or gave a | | | | Month | D_{ℓ} | ay Year |
| | ne of person to who | m I delivered | or mailed it | - | | | |
| Par | ty's or attorney's m | ailing addres: | S | City | | State | ZIP code |
| 8. Oa | th and Signat | ure | | | | | |
| I, _ | | | | , have rea | d this Reque | est, and I cert | ify under penalty |
| | rint your name | | | 01 1 11 | | | |
| | perjury and purs his Request is tr | | | e State of I | owa that the | information | have provided |
| - | | | 20 | | | | |
| Sign | ned on: Month | Day | Year | Your sign | ature* | | |
| Mai | iling address | | | City | | State | ZIP code |
| (| one number | - Em | ail address | | 144 | litional amail ad | dress – if available |
| | | | | 1 1 | | | |
| | | icany or in pap iing it and then | | | r signature on th | us jorm. 1j you ar | re filing electronically |

Rule 17.300—Form 328: Settlement Agreement on an Application to Modify Child Support

Use this form only if:

- You and the other party both agree to the terms of a Settlement Agreement.
- There is a current Iowa child support order in effect.
- · You would like to increase, decrease, or stop child support
- There is on file an Application to Modify Child Support.

Caution: This form may require you to provide protected or sensitive information.

- 🖳 If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure (311) if you have not already done so.
- If filing in paper, you may use form 311 to provide any protected information in full.

| ı the | lowa District Court for | County where Applica | ution was filed | Count |
|-----------------|---|---|---|---|
| Jpo | n the Petition of | Equity case | no | |
| Full na | tioner me of Petitioner as it is in the Application concerning | | nent Agreeme ation to Modit Support | |
| | oondent ne of Respondent as it is in the Application | | | |
| Ap | oplicant's Information Fill in all | l information that you know. | If you have been as | saulted by your |
| Ap | oplicant's Information Fill in all use and you fear for your safety, you made Applicant's information: | l information that you know. y leave your street address, irth year City | If you have been as phone number, and | saulted by your l email blank. ZIP code |
| Ap spo A. | oplicant's Information Fill in allowse and you fear for your safety, you made Applicant's information: | ny leave your street address, irth year City Phone number | phone number, and | email blank. ZIP code |
| Ap spo A. | Applicant's Information Fill in allowse and you fear for your safety, you made Applicant's information: Applicant's present street address County | ny leave your street address, irth year | phone number, and | email blank. ZIP code |

Rule~17.300 - Form~328: Settlement Agreement on an Application to Modify Child Support, continued

| Full n | ame: first, middle, last | | | | |
|-----------------------|---|-----------------------|--|----------|------------|
| Presen | nt street address | City | S | 'tate | ZIP code |
| Count | y | () Phone numbe | er E | Email ad | ddress |
| Agreeme | nt | | | | |
| A. Child s Check e | upport ach that is true, and fill in th | e blanks for the iten | ns you check. | | |
| (1) | Child support should be ra | aised from \$ | per mont | h to \$_ | |
| | per month beginning | nth | Day, 20 Yea | for | : |
| | First, middle, & last initials of each child | Birth year | First, middle, & la initials of each c | | Birth year |
| | a. | | d. | | |
| | b. | | e. | | |
| | c. | | f. | | |
| | Check this box if you h | ave attached a sepa | rate sheet listing addition | onal chi | ildren. |
| (2) | Child support should be Id | wered from \$ | per mont | h to \$_ | |
| | per month beginning | nth | Day , $20{Yea}$ | | : |
| | First, middle, & last initials of each child | Birth year | First, middle, & la initials of each c | | Birth year |
| | a. | | d. | | |
| | b. | | e. | | |
| | C. | | f. | | |
| | Check this box if you h | ave attached a sepa | rate sheet listing additio | onal chi | ildren. |
| (3) | c. Check this box if you h Check here if you want ch amount. If you check this, y | ild support to be hi | f. rate sheet listing addition gher or lower than the want and explain why in | Child S | |

| | Day day of Month | , 20 | for: | |
|-------------|--|--|--|----------------|
| | First, middle, & last initials of each child | Birth year | First, middle, & last initials of each child | Birth ye |
| | a. | | d. | |
| | b. | | е. | |
| | c. | | f. | |
| | Check this box if you ha | ave attached a separ | rate sheet listing additional chi | ldren. |
| (2) If y | There is a court order at to ou check (2), check a or b: | this time on tax d | | |
| ` ' — | There is a court order at to court check (2), check a or b: A court order currently should stay the same | his time on tax de y says who gets the y says who gets the | eductions. The tax deduction for the child The tax deduction for the child | |
| If yo | There is a court order at to cu check (2), check a or b: A court order currently should stay the same A court order currently | his time on tax de y says who gets the y says who gets the | eductions. The tax deduction for the child The tax deduction for the child | d or children |
| If yo | There is a court order at to check (2), check a or b: A court order currently should stay the same A court order currently should be changed as | this time on tax de y says who gets the s y says who gets the s set forth in the ta | the tax deduction for the child the child th | d or children |
| If yo | There is a court order at to check (2), check a or b: A court order currently should stay the same. A court order currently should be changed a should be changed a first, middle, & last initials of each child. | this time on tax de y says who gets the s y says who gets the s set forth in the ta | the tax deduction for the child the child th | d or children |
| If yo | There is a court order at to check (2), check a or b: A court order currently should stay the same. A court order currently should be changed a should be changed a first, middle, & last initials of each child. | this time on tax de y says who gets the s y says who gets the s set forth in the ta | the tax deduction for the child the child th | d or children |
| If yo | There is a court order at to check (2), check a or b: A court order currently should stay the same. A court order currently should be changed a should be changed a first, middle, & last initials of each child i. | this time on tax de y says who gets the s y says who gets the s set forth in the ta | the tax deduction for the child the child th | d or children |
| If yo | There is a court order at to check (2), check a or b: A court order currently should stay the same. A court order currently should be changed a should be changed a should be changed in it. | this time on tax de y says who gets the s y says who gets the s set forth in the ta | the tax deduction for the child the child th | d or children |
| If yo | There is a court order at tou check (2), check a or b: A court order currently should stay the same. A court order currently should be changed as a should be | y says who gets the says who gets the says who gets the says who gets the says forth in the target. Birth year | the tax deduction for the child the child th | d or children |
| a. b. | There is a court order at to check (2), check a or b: A court order currently should stay the same. A court order currently should be changed at should be changed at should be changed at initials of each child it. ii. iii. iv. v. Check this box if you insurance or cash mediated as the court order currently should be changed at should be | y says who gets the says who g | he tax deduction for the child he tax deduction for the child able below. Explain Person who should now tax deduction. | claim child fo |

| Rule 17.30 | 0—Form 328: Settlem | ent Agreement on an Application | to Modify Child Support, | continued |
|------------|-------------------------------|--|--------------------------|--|
| | | A court order currently s children and it should st | | nealth care expenses for the child or |
| | b. 🗌 | A court order currently s be changed as set forth | | nealth care expenses and it should . Explain |
| | | | | |
| | | First, middle, & last initials of each child | Birth year | Person who should now provide health insurance or cash medical support |
| | | i. | | |
| | | ii. | | |
| | | iii. | | |
| | | iv. | | |
| | | v. | | |
| | | Check this box if you | are attaching a sepai | rate sheet listing additional children. |
| | (3) Applicant sh | nould pay % | of the | out-of-pocket health care expenses. |
| | (4) The other pa expenses. | arent should pay % | | of the out-of-pocket health care |
| | (5) Applicant sh | nould pay % | in cas | sh medical support. |
| | (6) The other pa | arent should pay % | in cash me | edical support. |
| | Court Fees Check one | | | |
| | (1) All court | fees should be paid by | Applicant. | |
| | | fees should be paid by | | |
| | | | | f of the remaining court fees. |
| | (4) The oth | er parent and Applicant | should pay one-hal | f of the total court fees. |
| | | | | |
| | | | | |

Continued on next page

Rule 17.300—Form 328: Settlement Agreement on an Application to Modify Child Support, continued

| | E. | | orne eck d | - | Fees | | | | | | | | | | | | |
|------------------------|--------|--------------------------|---------------|-------------|-------------|------------------------|---------|--------------|----------|----------|-----------|----------|------------|-----------|--------|-----------------|-----|
| | | (1) | Ар | plica | ant's atto | rney's fee | es | | | | | | | | | | |
| | | | a. | | Applica | nt has no | attor | ney's fe | ees. | | | | | | | | |
| | | | b. | | Applica | nt will pa | у Арр | licant's | own a | attorne | ey's fe | es. | | | | | |
| | | | C. | | Applica | nt asks t | hat the | e other | party | pay \$ | | | _ for A | pplicant | 's a | ttorney's fee | S. |
| | | (2) | Th | e otl | her party | 's attorne | ey's fe | es | | | | | | | | | |
| | | | a. | | The oth | ner party | has no | o attorn | ey's f | ees. | | | | | | | |
| | | | b. | | The oth | ner party | will pa | ay his o | r her d | own at | torney | 's fees | S . | | | | |
| | | | C. | | The oth | ner party | asks t | hat App | olicant | t pay \$ | <u> </u> | | _ for th | e other | part | ty's attorney | 's |
| 4. | W m | le as ay b | sk tl e n | hat leec | ded to ca | | the te | rms of | the [| Decre | e Mod | | | | | papers that | |
| | _ | | | | | | | | | | | | | | | | _ |
| | | | | | | | | | | | | | | | | | _ |
| | | | | | | | | | | | | | | | | | _ |
| 5. | | torr Ap <i>Che</i> | - | ant | elp | | | | | | | | | | | | |
| | | (1) | | An | attorne | y did no | t help | the A | pplica | ant pro | epare | or fill | in this | paper. | | | |
| | | (2) | | | | y helped ou must fi | | | | • | | l in thi | is pap | er. | | | |
| | | | Na | me o | of attorney | or organ | ization | ı, if any | | Atto | rney's l | P.I.N. 3 | # - Ask | the atto | rney | , | |
| | | | Bu | sines | ss address | of attorn | ey or o | rganiza | tion | City | | | | State | _ | ZIP code | _ |
| | | | (| orne | y 's phone | number | | (Attorne | y 's fas | c numb | er – opti | ional | Attor | ney 's en | ıail d | address – optio | nal |
| | B. | | e ot | | party | | | | | | | | | | | | |
| | | (1) | | An | attorne | y did no | t help | the ot | her p | arty p | repar | e or fi | ill in th | is pape | ∍r. | | |
| | | | | | | y helped | - | | - | | - | | | | | | |

Rule 17.300—Form 328: Settlement Agreement on an Application to Modify Child Support, continued If you check (2), you must fill in the following information: Name of attorney or organization, if any Attorney's P.I.N. # – Ask the attorney State ZIP code Business address of attorney or organization City

6.

| () | | _ () | | | |
|--|---|--|--|--|-----------------------|
| Attorney's phon | e number | Attorney's f | ax number – optional | Attorney's emo | ail address – optiona |
| aths and Signat | ures | | | | |
| his Settlement Agree full disclosure of our part of the final Decr | income to th | e court. We w | ant the court to app | | |
| . Applicant's Oath a | nd Signature | ; | | | |
| I, Print your name | | , cert | ify under penalty of pe | erjury and pursuar | nt to the |
| like the court to addr attorney about this A | ess the issues greement. I a nted to a judg | s in this child sup am voluntarily sig e for approval ar | ement Agreement and oport modification. I k gning this Agreement. and filing with the court | now I have the rig I am asking that | ht to talk to an |
| Month | Day | , 20 <u>Year</u> | Applicant's signa | ture* | |
| Mailing address | | | ty | State | ZIP code |
| () Phone number | | Email address | A | dditional email ac | ddress – if available |
| * Whether filing elect electronically, scan | ronically or in p | paper, you must h | andwrite your signature a file electronically. | on this form. If you | u are filing |
| The other party's (| _ | | ify under penalty of pe | erjury and pursuar | nt to the |
| laws of the State of like the court to addrattorney about this A | ess the issues greement. I a nted to a judg | s in this child sur am voluntarily sig e for approval ar | ement Agreement and opport modification. I k gning this Agreement. Individual filing with the court | now I have the rig I am asking that | ht to talk to an |
| Month | Day | , 20 <u></u> | Other party's sign | nature* | |
| Mailing address | | Cit | ty | State | ZIP code |
| () Phone number | | Email address | | dditional email ad | ddress – if available |
| | | | andwrite vour signature | | |

electronically, scan the form after signing it and then file electronically.

CHAPTER 25 RULES FOR EXPANDED NEWS MEDIA COVERAGE

| Definitions |
|-------------|
| General |
| Procedural |
| Technical |
| |

Rule 25.5 Supreme court and court of appeals

Rules 25.6 to 25.9 Reserved Rule 25.10 Forms

Form 1: News Media Coordinator's Notice of Request for

Expanded News Media Coverage of Trial or Proceeding

Form 2: Objection of Party to Expanded News Media Coverage

of Trial or Proceeding

Form 3: Objection of Witness to Expanded News Media Coverage

of Testimony

Form 4: News Media Coordinator's Notice of Request for

Expanded News Media Coverage of Appellate Court

Proceeding

CHAPTER 25 RULES FOR EXPANDED NEWS MEDIA COVERAGE

Rule 25.1 Definitions. As used in this chapter:

- **25.1(1)** "Expanded news media coverage" includes broadcasting, recording, photographing, and live electronic reporting of judicial proceedings by the news media for gathering and disseminating news in any medium. Expanded news media coverage is limited to the news media unless otherwise ordered by the judicial officer.
- **25.1(2)** "Good cause" for purposes of exclusion under this chapter means that coverage will have a substantial effect upon the objector that would be qualitatively different from the effect on members of the public in general.
- **25.1(3)** "Judicial officer" means the magistrate, district associate judge, or district judge presiding in a trial court proceeding, or the presiding judge or justice in an appellate proceeding.
- **25.1(4)** "Judicial proceedings" or "proceedings" includes all public trials, hearings, or other proceedings in a trial or appellate court, for which expanded news media coverage is requested, except those specifically excluded by this chapter.
- **25.1(5)** "News media" includes any person who regularly gathers, prepares, photographs, records, writes, edits, reports, or publishes news or information about matters of public interest in any medium and who successfully applies to participate in expanded news media coverage and agrees to comply with all court rules.
- **25.1(6)** "News media coordinator" includes news media coordinating councils as well as the designees of such coordinators or councils.

[Court Order November 9, 2001, effective February 15, 2002; April 2, 2014, effective May 1, 2014]

- **Rule 25.2 General.** Expanded news media coverage of judicial proceedings will be permitted under the following conditions:
- **25.2(1)** *Prior authorization.* No expanded news media coverage shall occur without prior express authorization from the judicial officer, who may prescribe conditions of coverage as provided in this chapter.
- **25.2(2)** *Rights to a fair trial.* Expanded news media coverage of a proceeding is permitted, unless the judicial officer concludes, for reasons stated on the record, that under the circumstances of the particular proceeding, such coverage would materially interfere with the rights of the parties to a fair trial.
 - **25.2(3)** Coverage of witnesses.
- a. Expanded news media coverage of a witness may be refused by the judicial officer upon objection and showing of good cause by the witness.
- b. In prosecutions for sexual abuse, or for charges in which sexual abuse is an included offense or an essential element of the charge, no expanded news media coverage of the testimony of a victim witness is permitted unless such victim witness consents.
- c. Objection by a victim or witness in any other forcible felony prosecution, and by police informants, undercover agents, and relocated witnesses, shall enjoy a rebuttable presumption of validity. The presumption is rebutted by a showing that expanded news media coverage will not have a substantial effect upon the particular individual objecting to such coverage that would be qualitatively different from the effect on members of the public in general.
 - **25.2(4)** *Initial appearances in criminal proceedings.*
- a. Oral or written requests for expanded news media coverage of initial appearances in criminal proceedings must be made to the judicial officer presiding over the proceeding. Such expanded news media coverage, if authorized by the judicial officer, is subject to objection by the prosecutor, defendant, or defendant's attorney.
- b. The defendant shall be advised by the judicial officer of the defendant's right to orally object to expanded news media coverage prior to the commencement of the proceeding, and any such objection will be heard and determined by the judicial officer prior to the commencement of the proceeding. The judicial officer may rule on the basis of the oral objection alone.
- c. A judicial officer's authorization of expanded news media coverage of an initial appearance applies only to the particular initial appearance. Authorization for expanded news media coverage of proceedings subsequent to the initial appearance must be requested separately under rule 25.3(2)(b).

- **25.2(5)** *Private court proceedings.* Expanded news media coverage is prohibited for any court proceeding which, under Iowa law, is required to be held in private. Coverage is prohibited in any juvenile, dissolution, adoption, child custody, or trade secret cases unless consent on the record is obtained from all parties, including a parent or guardian of a minor child.
- **25.2(6)** *Jury selection.* Expanded news media coverage of jury selection is prohibited. Expanded news media coverage of the return of the jury's verdict shall be permitted. In all other circumstances, however, expanded news media coverage of jurors is prohibited except to the extent it is unavoidable in the coverage of other trial participants or courtroom proceedings. The policy of the rules in this chapter is to prevent unnecessary or prolonged photographic or video coverage of individual jurors.
- **25.2(7)** *Court conferences.* There shall be no audio pickup or broadcast of conferences in a court proceeding between attorneys and their clients, between co-attorneys, between attorneys and the judicial officer held at the bench or in chambers, or between judicial officers in an appellate proceeding.
- **25.2(8)** *Equipment.* The quantity and types of equipment permitted in the courtroom are subject to the discretion of the judicial officer within the guidelines set out in this chapter.
- **25.2(9)** *Variance application.* Notwithstanding the provisions of any of the procedural or technical rules in this chapter, the judicial officer, upon application of the news media coordinator, may permit the use of equipment or techniques at variance with the rules, provided the application for variance is included in the advance notice of coverage provided for in rule 25.3(2). Objections, if any, shall be made as provided in rule 25.3(3). Ruling upon such a variance application is in the sole discretion of the judicial officer, who may allow such variances without advance application or notice if all attorneys and parties consent to the variance.
- **25.2(10)** Limiting coverage during proceeding. The judicial officer may, as to any or all news media participants, limit or terminate expanded news media coverage at any time during the proceedings in the event the judicial officer finds that rules established under this chapter, or additional rules imposed by the judicial officer, have been violated or that substantial rights of individual participants or rights to a fair trial will be prejudiced by such manner of expanded news media coverage if it is allowed to continue.
- **25.2(11)** *Limited to news media.* The privileges of expanded news media coverage provided for in these rules may be exercised only by persons or organizations that are part of the news media.
- **25.2(12)** *Identification*. All news media personnel authorized to use electronic devices in the courtroom must wear identification, which is clearly visible to the judicial officer and members of the jury and which states the person's name and media affiliation.
- **25.2(13)** Ceremonial proceedings. A judicial officer may authorize expanded news media coverage of investitive or ceremonial proceedings at variance with the procedural and technical rules of this chapter as the judicial officer sees fit.

[Amended by Court Order September 26, 1984, effective October 10, 1984; November 9, 2001, effective February 15, 2002; April 2, 2014, effective May 1, 2014]

Rule 25.3 Procedural.

25.3(1) News media coordinator and coordinating councils. News media coordinators will be appointed by the supreme court from a list of nominees provided by a representative of the news media whom the supreme court designates. The judicial officer and all interested members of the news media will work, whenever possible, with and through the appropriate news media coordinator regarding all arrangements for expanded news media coverage. The supreme court will designate the jurisdiction of each news media coordinator. In the event a news media coordinator has not been nominated or is not available for a particular proceeding, the judicial officer may deny expanded news media coverage or may appoint an individual from among local working representatives of the news media to serve as the coordinator for the proceeding.

25.3(2) *Advance notice of coverage.*

a. All requests for expanded news media coverage in all proceedings, except initial appearances in criminal cases, shall be made to the news media coordinator. The news media coordinator, in turn, shall inform the attorneys for all parties and the judicial officer at least seven days in advance of the time the proceeding is scheduled to begin, but these times may be extended or reduced by court order. When the proceeding is not scheduled at least seven days in advance, the news media coordinator or news media coordinating council must give notice of the request as soon as practicable after the proceeding is scheduled.

- b. Notice must be filed electronically or by paper copy with the appropriate clerk of court. A copy of the notice shall be sent electronically, delivered by ordinary mail, or delivered in person to the last known contact of all attorneys of record, parties appearing without attorney representation, the appropriate court administrator, and the judicial officer expected to preside at the proceeding for which expanded news media coverage is requested.
- c. A separate request for expanded news media coverage must be made for Iowa Supreme Court and Iowa Court of Appeals oral arguments, pursuant to rule 25.5.
- d. Form 1 in rule 25.10 is the notice form for the news media coordinator to use to inform the attorneys for all parties and the judicial officer of a request for expanded news media coverage of the proceeding.

25.3(3) Objections.

- a. A party to any proceeding, except an initial appearance in a criminal case, objecting to expanded news media coverage under rule 25.2(2) must file a written objection, stating the grounds for objection, at least three days before commencement of the proceeding.
- b. All witnesses must be advised by the attorney proposing to introduce their testimony of their right to object to expanded news media coverage, and all objections by witnesses under rule 25.2(3) must be filed prior to commencement of the proceeding.
- c. Witnesses shall be entitled to the assistance of the clerk of court in providing copies of this objection to all attorneys of record, parties appearing without attorney representation, the news media coordinator for the judicial district, the district court administrator for the judicial district, and the judicial officer expected to preside in the proceeding.
- d. All objections shall be heard and determined by the judicial officer prior to the commencement of the proceedings. The judicial officer may rule on the basis of the written objection alone.
- e. The objecting party or witness, and all other parties, may be afforded an opportunity to present additional evidence by affidavit or by such other means as the judicial officer directs. The judicial officer in absolute discretion may permit presentation of such evidence by the news media coordinator in the same manner.
- f. Time for filing of objections may be extended or reduced in the discretion of the judicial officer, who also, in appropriate circumstances, may extend the right of objection to persons not specifically provided for in this chapter.
- g. Form 2 in rule 25.10 is the form for parties and Form 3 is the form for witnesses to use to object to expanded news media coverage of the proceeding.

[Court Order November 9, 2001, effective February 15, 2002; May 27, 2010; April 2, 2014, effective May 1, 2014; April 29, 2014, effective May 1, 2014]

Rule 25.4 Technical.

- **25.4(1)** Equipment specifications. Equipment used by the news media in courtrooms during judicial proceedings must be unobtrusive and must not produce distracting sound. In addition, such equipment must satisfy the following criteria, where applicable:
- a. Still cameras. Still cameras and lenses must be unobtrusive and not cause distracting light or sound.
- b. Television cameras and related equipment. Television cameras, together with any related equipment to be located in the courtroom, must be unobtrusive in both size and appearance, without distracting sound or light. Television cameras are to be designed or modified so that participants in the judicial proceedings are unable to determine when recording is occurring.
- c. Audio equipment. Microphones, wiring, and audio recording equipment must be unobtrusive and of adequate technical quality to prevent interference with the judicial proceeding being covered. The judicial officer must approve any changes in existing audio systems. No modifications of existing systems shall be made at public expense. Microphones for attorneys and judicial officers to use must be equipped with off/on switches to facilitate compliance with rule 25.2(7).
- d. Electronic devices. All electronic devices used for recording audio, video, or still images must adhere to rule 25.4(3)(a). All other electronic devices not used for recording audio, video, or still images must be unobtrusive and not cause distracting light or sound, and are not subject to the limitations of rule 25.4(3)(a). Electronic devices include, but are not limited to, laptop computers, cellular telephones, personal digital assistants, smart phones, and tablet computers.
- e. Advance approval. It is the duty of news media personnel to demonstrate to the judicial officer reasonably in advance of the proceeding that the equipment sought to be utilized meets the criteria set forth in this rule. Failure to obtain advance judicial approval for equipment may preclude its use

in the proceeding. All news media equipment and personnel must be in place at least fifteen minutes prior to the scheduled time of commencement of the proceeding.

- **25.4(2)** *Lighting.* Other than light sources already existing in the courtroom, no flashbulbs or other artificial light device of any kind shall be employed in the courtroom. With authorization from the judicial officer modifications may be made in light sources existing in the courtroom (e.g., higher wattage lightbulbs), provided such modifications are installed and maintained without public expense.
- **25.4(3)** *Equipment and pooling.* The following limitations on the amount of equipment and number of photographic and broadcast news media personnel in the courtroom apply:
- a. Video recording, audio recording, and still photography. Not more than five total members of the news media using still cameras, television cameras, audio recorders, and electronic devices, or any combination of the four, to photograph, video, or record audio are permitted in the courtroom during a judicial proceeding. Each still photographer may use two camera bodies each with a fixed lens or one camera body and two lenses. Where possible, all recording and broadcasting equipment that is not a component part of a camera or an electronic device and any operating personnel shall be located outside of the courtroom. Audio pickup for broadcast coverage must be accomplished from any existing audio system present in the courtroom if such pickup would be technically suitable for broadcast
- b. Electronic devices not used for recording audio, video, or still images. The devices defined in rule 25.4(1)(d) may be used in the courtroom by members of the news media for live electronic reporting with advance approval from the judicial officer, provided the equipment does not make any disruptive noise or interfere with court equipment. Electronic devices may not be used for telephone calls by anyone in the courtroom. Electronic devices for photography, video recording, audio recording, or streaming video may not be used by anyone in the courtroom unless approved by the judicial officer in advance of the proceeding as defined in rule 25.4(3)(a). The rule applies to news media only as defined in rule 25.1. Use of such electronic devices by others is prohibited.
- c. Pooling. Where the above limitations on equipment and personnel make it necessary, the news media shall be required to pool equipment and personnel. Pooling arrangements are the sole responsibility of the news media coordinator, and the judicial officer will not mediate any dispute as to the appropriate news media representatives authorized to cover a particular judicial proceeding. Representatives of news media are responsible for contributing to electronic pool coverage of judicial proceedings when necessary. If a news organization is incapable of contributing to pool coverage, the news media coordinator may allow the news organization to share the pool coverage or may restrict the news organization's coverage.
- **25.4(4)** Location of equipment and personnel. Equipment and operating personnel, including news media using electronic devices to transmit and receive data communication, must be located in, and coverage of the proceedings must take place from, an area or areas the judicial officer designates within the courtroom. The area or areas designated shall provide reasonable access to the proceeding to be covered
- **25.4(5)** Movement during proceedings. Television cameras and audio equipment may be installed in or removed from the courtroom only when the court is not in session. In addition, such equipment shall at all times be operated from a fixed position. News media personnel are prohibited from moving about the courtroom while proceedings are in session and from engaging in any movement that attracts undue attention.
- **25.4(6)** *Decorum.* All news media personnel shall be properly attired and shall maintain proper courtroom decorum at all times while covering a judicial proceeding.

[Court Order October 9, 1975; December 22, 1981 — received and published May 1982; July 19, 1989; March 9, 1994, effective April 1, 1994; November 9, 2001, effective February 15, 2002; April 2, 2014, effective May 1, 2014]

Rule 25.5 Supreme court and court of appeals.

- **25.5(1)** Expanded news media coverage of oral arguments.
- a. All regularly scheduled Iowa Supreme Court and Iowa Court of Appeals oral arguments will be available for streaming over the Internet and expanded news media coverage. The rules in this chapter allowing objections to expanded news media coverage do not apply to supreme court and court of appeals oral arguments.
- b. The prohibitions in rule 25.2(5) on the types of cases subject to expanded news media coverage do not apply to supreme court and court of appeals oral arguments.
 - **25.5(2)** Expanded news media coverage.
- a. The rules in this chapter pertaining to expanded news media coverage apply only to news media coverage occurring within the supreme court and court of appeals courtrooms. Recordings of supreme court and court of appeals oral arguments made from other locations within the judicial building are not subject to the rules on expanded news media coverage.
- b. A written request for expanded news media coverage within the supreme court and court of appeals courtrooms must be filed with the clerk of the supreme court no later than the Friday immediately preceding the week in which the argument is to be held.
- c. Form 4 in rule 25.10 is the notice form for the news media coordinator to use to inform the attorneys for all parties and the presiding justice or judge of a request for expanded news media coverage of the oral argument.

[Court Order February 17, 2006; April 9, 2009; April 2, 2014, effective May 1, 2014; April 29, 2014, effective May 1, 2014]

Rules 25.6 to 25.9 Reserved.

Rule 25.10 Forms.

Rule 25.10—Form 1: News Media Coordinator's Notice of Request for Expanded News Media Coverage of Trial or Proceeding

- The expanded news media coordinator uses this form to give notice of a request for expanded news media coverage to the
 attorneys for all parties and the judicial officer at least seven days before the proceeding begins.
- A separate request for expanded news media coverage must be made for appellate court arguments.

| ln t | the Iowa District Court for | County where you are filing this form |
|------|---|--|
| | | No |
| Pla | nintiff Full name: first, middle, last | News Media Coordinator's Notice of Request for Expanded News Media Coverage of Trial or Proceeding |
| De | fendant Full name: first, middle, last | |
| The | e undersigned news media coordinator stat | tes as follows: |
| 1. | Certain representatives of the news medical A. Photographic equipment, B. Television cameras, C. Electronic sound recording equipment, D. Other electronic devices, in courtroom coverage of the above process. | ment, or |
| 2. | the ${Day}$ day of ${Month}$, 20 ${Year}$ County Courthouse, ${City}$ | expanded news media coverage is scheduled for, at |
| 3. | The request for expanded news media conumber of photographers with still camer | overage is described as follows (for example, the as): |
| | | |
| | | |
| | | |
| | | |

Continued on next page

| Rule 25.10— | -Form 1: <i>Ne</i> | ews Media (| Coordinator | 's Notice | of Request j | for E | Expanded Nev | vs Media | Coverage of | of Trial o | rProcee | ding, |
|-------------|--------------------|-------------|-------------|-----------|--------------|-------|--------------|----------|-------------|------------|---------|-------|
| continued | | | | | | | | | | | | |

| coverage is requested; or | news media coverage is filed: Check one ce of the proceeding for which expanded news media thin seven days of the proceeding because of the |
|--|---|
| following reasons: | initi seven days of the proceeding because of the |
| person to the last known address of a attorney representation, the district co | |
| Parties appearing without attorney re | presentation: |
| District court administrator: Presiding judge: | |
| The undersigned news media coording proceeding as described in this notice | nator requests expanded news media coverage of the |
| - | nator requests expanded news media coverage of the. |
| _ | nator requests expanded news media coverage of the . /s/ |
| - | nator requests expanded news media coverage of tl e. |
| _ | nator requests expanded news media coverage of the. /s/ |
| _ | nator requests expanded news media coverage of the. /s/ |
| _ | nator requests expanded news media coverage of the. /s/ |

Rule 25.10—Form 2: Objection of Party to Expanded News Media Coverage of Trial or Proceeding

- · This form is used when a party to the proceeding objects to expanded news media coverage of a trial or proceeding.
- The party's objection must be filed three days before the start of the proceeding in the court in which the proceeding will be held.

| ln ' | the lowa District Court for | County where you are filing this form |
|------------|---|---|
| | | No. |
| Plá vs. | aintiff Full name: first, middle, last | Objection of Party to Expanded News Media Coverage of Trial or Proceeding |
| De | fendant Full name: first, middle, last | |
| The | e undersigned party, or the party identified b | elow, in this proceeding states as follows: |
| 1. | There is a request for expanded news med | lia coverage of this proceeding. |
| 2. | | ded news media coverage, under the particular naterially interfere with the right of the party to a ircumstances support this objection: |
| | | |
| 3. | This objection is filed at least three days be expanded news media coverage is reques | |
| 4. | without attorney representation, the district | ctronically, delivered by ordinary mail, or ess of all attorneys of record, parties appearing court administrator for this judicial district, and ne trial or proceeding for which expanded news |
| 5. | | a coverage of this proceeding for the reasons |
| | Print full name of party | /s/ |
| | | Law firm, or entity for which filing is made, if applicable |
| | | Mailing address |
| | | City State ZIP code () Phone number |
| | | Email address |
| | | Additional email address, if available |
| May | / 2014 Rule 25 1 | 10—Form 2 Page 1 of |

[Court Order December 22, 1981 — received and published May 1982; November 9, 2001, effective February 15, 2002; February 17, 2006; April 2, 2014, effective May 1, 2014; April 29, 2014, effective May 1, 2014]

Rule 25.10—Form 3: Objection of Witness to Expanded News Media Coverage of Testimony

- A witness called to testify in a proceeding uses this form to object to expanded news media coverage of the testimony of the witness.
- An objection of the witness to expanded news media coverage of the testimony of the witness must be filed with the court at least three days before commencement of the proceeding.

| In ' | the lowa District Court for | Cou | | | | |
|------------|---|--|------------------|--|--|--|
| _ | | County where you are filing this form | | | | |
| Pla vs. | aintiff Name | No Objection of Witness to Expa News Media Coverage of Tes | | | | |
| De | fendant Name | | | | | |
| The | e undersigned witness, or witness identified b | elow, in this proceeding states as fo | llows: | | | |
| 1. | Expanded news media coverage is requeste begin in the near future. | ed for this proceeding, which is sche | eduled to | | | |
| 2. | The witness expects to be called to testify in | this case. | | | | |
| 3. | The witness objects to expanded news med following specific reasons: | ia coverage of testimony of the witn | ess for the | | | |
| | | | | | | |
| | | | | | | |
| 4. | The witness understands this objection mus days before commencement of the proceed | | ast three | | | |
| 5. | The witness asks the clerk of court for assis attorneys of record, parties appearing without judicial district, the district court administrate expected to preside in this proceeding. | ut attorneys, the media coordinator | for this | | | |
| 6. | The witness objects to expanded news med reasons stated above. | ia coverage of testimony of the witn | ess for the | | | |
| | Print full name of witness | /s/ | | | | |
| | Frint fait name of witness | rung winess (or attorney if applicable) | | | | |
| th | ote: A witness may file this form in paper with e clerk of court under lowa Court Rule | Law firm, or entity for which filing is mad | e, if applicable | | | |
| | 5.302(2), providing exceptions from electronic ing. | Mailing address (optional for witness) | | | | |
| ca | you need assistance to participate in court due to a disability, all the disability coordinator (information at www.iowacourts.gov/Representing_Yourself/ADAAccess). | City State () Phone number (optional for witness) | ZIP code | | | |
| | wa TTY (1-800-735-2942). Disability coordinators cannot ovide legal advice. | | | | | |
| | - | Email address (optional for witness) | | | | |
| May | y 2014 Rule 25.10 |)—Form 3 | Page 1 of 1 | | | |

[Court Order December 22, 1981 — received and published May 1982; July 19, 1989; November 9, 2001, effective February 15, 2002; February 17, 2006; April 2, 2014, effective May 1, 2014; April 29, 2014, effective May 1, 2014]

Rule 25.10—Form 4: News Media Coordinator's Notice of Request for Expanded News Media Coverage of Appellate Court Proceeding

- · A separate request for expanded news media coverage must be made for appellate court oral arguments.
- A written request for expanded news media coverage within the supreme court and court of appeals courtrooms must be filed
 with the clerk of the supreme court no later than the Friday immediately preceding the week in which the argument is to be
 held.

| | In the Iowa Appellate Courts | | | | | |
|--------|--|---|--|--|--|--|
| List 2 | Appellant or Appellee as captioned in the appeal | Appellate Case No | | | | |
| List | Appellant or Appellee as captioned in the appeal | | | | | |
| The | undersigned news media coordinator state. Certain representatives of the news media A. Photographic equipment, B. Television cameras, | | | | | |
| | C. | • | | | | |
| 2. | The proceeding to be covered by expanded the day of, 20 | d news media coverage is scheduled for, at $\frac{\Box}{Time}$ $\frac{\Box}{\Box}$ p.m. at the lowa Judicial Branch | | | | |
| | Building in Des Moines, Iowa. The oral arg | gument will be held before the erage includes every part of such proceeding as | | | | |
| 3. | The request for expanded news media cov number of photographers with still cameras | erage is described as follows (for example, the | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Continued | on next page | | | | |

 $\label{lem:continuous} \textbf{Rule 25.10} - \textbf{Form 4: News Media Coordinator's Notice of Request for Expanded News Media Coverage of Appellate Court Proceeding, continued \\$

| 4. | Thi | s no | ice of request for expanded news media coverage is filed: Check one |
|----|-----------------------------|------------------------------|--|
| | Α. | | No later than the Friday immediately preceding the week in which the argument is to be held; or |
| | B. | | This notice cannot be filed on or before the Friday immediately preceding the week in which the argument is to be held because of the following reasons: |
| | | | |
| 5. | per atto pre follo | son orney side ows: | of this notice will be sent electronically, delivered by ordinary mail, or delivered in to the last known address of all attorneys of record, parties appearing without representation, the state court administrator, and the justice or judge expected to at the oral argument for which expanded news media coverage is requested, as |
| | | 01110 | , c |
| | | | |
| | Pai | ties | appearing without attorney representation: |
| | | | |
| | | | |
| | Sta | te C | ourt Administrator: |
| | Pre | sidir | g Justice or Judge: |
| 6. | | | dersigned news media coordinator requests expanded news media coverage of this ling as described in this notice. |
| | | | /s/ News media coordinator's signature |
| | | | News media coordinator's signature |
| | | | News media coordinator's printed name |
| | | | Mailing address |
| | | | City State ZIP code |
| | | | () Phone number |
| | | | Email address |
| | | | Additional email address, if available |

CHAPTER 31 ADMISSION TO THE BAR

| Rule 31.1 | Board of law | examiners |
|----------------------|------------------|--|
| Rule 31.2 | Registration by | y law students |
| Rule 31.3 | Required exan | ninations |
| Rule 31.4 | Transfer and b | eanking of MBE scaled scores |
| Rule 31.5 | Bar examination | on application—contents and deadlines |
| Rule 31.6 | Fee | |
| Rule 31.7 | Affidavit of in | tent to practice |
| Rule 31.8 | Degree require | ement |
| Rule 31.9 | Moral characte | er and fitness |
| Rule 31.10 | Preservation o | f anonymity |
| Rule 31.11 | Automatic rev | riew |
| Rule 31.12 | Admission of a | attorneys from other jurisdictions—requirements and fees |
| Rule 31.13 | Proofs of qual | ifications; oath or affirmation |
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| Rule 31.15 | Permitted prac | tice by law students and recent graduates |
| Rule 31.16 | Registration of | f house counsel |
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| Rule 31.18 | Licensing and | practice of foreign legal consultants |
| Rule 31.19 | Certification as | nd pro bono participation of emeritus attorneys |
| Rules 31.20 to 31.24 | Reserved | |
| Rule 31.25 | Forms | |
| | Form 1: | Application for Admission Pro Hac Vice — District |
| | | Court |
| | Form 2: | Application for Admission Pro Hac Vice — Supreme |

Form 3:

Registration statement for lawyer engaging in temporary practice following determination of major disaster

CHAPTER 31 ADMISSION TO THE BAR

Rule 31.1 Board of law examiners.

31.1(1) *Composition.*

- a. The board of law examiners shall consist of five persons admitted to practice law in this state and two persons not admitted to practice law in this state. Members shall be appointed by the supreme court. A member admitted to practice law shall be actively engaged in the practice of law in this state.
- b. Appointment shall be for three-year terms and shall commence on July 1 of the year in which the appointment is made. Vacancies shall be filled for the unexpired term by appointment of the supreme court. Members shall serve no more than three terms or nine years, whichever is less.
- c. The members thus appointed shall sign a written oath to faithfully and impartially discharge the duties of the office and shall file the oath in the office of professional regulation. They shall be compensated for their services in accordance with the provisions of Iowa Code section 602.10106.
- d. The supreme court may appoint temporary examiners to assist the board, who shall receive their actual and necessary expenses to be paid from funds appropriated to the board.
- e. The members of the board of law examiners and the temporary examiners shall be paid a per diem in an amount the supreme court sets for each day spent in conducting or grading the examinations of the applicants for admission to the bar and in performing administrative and character and fitness investigation duties. They shall also be reimbursed for additional expenses necessarily incurred in the performance of such duties.
- f. The assistant director for admissions of the office of professional regulation shall serve as the principal administrator for the board of law examiners. Wherever in this chapter a reference to the "assistant director" appears, it shall refer to the assistant director for admissions of the office of professional regulation.
- g. The board shall have an administrative committee consisting of the chair, the director of the office of professional regulation and a nonattorney member of the board appointed by the court. The administrative committee shall, at least 60 days prior to the start of each fiscal year, submit to the court for consideration and approval a budget covering the board's operations for the upcoming fiscal year. Approval of the budget by the court shall authorize payment as provided in the budget. A separate bank account designated as the admissions operating account shall be maintained for payment of authorized expenditures as provided in the approved budget. Fees or other funds received or collected as directed in this chapter or in accordance with an approved interagency agreement shall be deposited in the admissions operating account for payment of the board's authorized expenditures.
- h. Claims against members of the board and the director, assistant directors, and the staff of the office of professional regulation are subject to the Iowa Tort Claims Act set forth in Iowa Code chapter 669.
- *i.* The board of law examiners and its members, employees, and agents; temporary law examiners; and the director, assistant directors, and the staff of the office of professional regulation are immune from all civil liability for damages for conduct, communications, and omissions occurring in the performance of and within the scope of their official duties relating to the examination, character and fitness qualification, and licensing of persons seeking to be admitted to the practice of law.
- *j.* Records, statements of opinion, and other information regarding an applicant for admission to the bar communicated by any entity, including any person, firm, or institution, without malice, to the board of law examiners, its members, employees, or agents, or to the director, assistant director, and the staff of the office of professional regulation are privileged, and civil suits for damages predicated thereon may not be instituted.

31.1(2) *Duties.*

- a. The board may adopt rules to govern the method of conducting the bar examination. Such rules shall be consistent with these rules and are subject to supreme court approval.
- b. The authority to pass on the sufficiency of applications for permission to take the bar examination is vested in the board of law examiners, subject to supreme court review.
- c. The members of the board authorized to grade examinations shall make the final decision on passage or failure of each applicant, subject to the rules of the supreme court. The board shall also recommend to the supreme court for admission to practice law in this state all applicants who pass the bar examination and the Multistate Professional Responsibility Examination, and who meet the requisite character and fitness requirements. The board, in its discretion, may permit an applicant

to take the bar examination prior to finally approving that person as to character and fitness. It may impose specific conditions for admission based on its evaluation of character and fitness and shall withhold recommendation of admission until those conditions are satisfied. An applicant who passes the bar examination shall satisfy such character and fitness conditions and any other conditions imposed by the board within one year of the date of the applicant's passage of the examination. This period may be extended by the board upon the applicant's showing of good cause. If any conditions imposed are not satisfied within the applicable period of time, the applicant's passage of the examination is null and void and the applicant must retake the bar examination in order to gain admission. The supreme court shall make the final determination as to those persons who shall be admitted to practice in this state.

d. An applicant who has passed the examination and is eligible for admission must be administered the lawyer's oath by a supreme court justice within one year of the date the bar examination score was posted or the date of fulfilling all eligibility requirements, whichever is later. An applicant who fails to be administered the oath within this deadline will no longer be eligible for admission and the applicant's passage of the examination will be null and void. This deadline may only be extended by the board upon a showing of exceptional circumstances.

[Court Order July 2, 1975; September 20, 1976; April 17, 1990, effective June 1, 1990; January 17, 1995, effective March 1, 1995; June 5, 1996, effective July 1, 1996; November 9, 2001, effective February 15, 2002; February 14, 2008, effective April 1, 2008; June 5, 2008, effective July 1, 2008; February 20, 2012; December 10, 2012]

Rule 31.2 Registration by law students.

- **31.2(1)** Every person intending to apply for admission to the bar of this state by examination shall, by January 15 of the year after the person commences the study of law in an accredited law school, register with the Iowa board of law examiners on forms furnished by the board and pay the required fee of \$40. The board may designate data submitted as a confidential record. Any confidential data shall be segregated by the board and the assistant director from the portion of the registration filed as a public record.
- 31.2(2) If any person shall fail to so register, the board may, if it finds that a strict enforcement of this rule would work a hardship and that sufficient excuse exists for failing to comply with rule 31.2(1), waive the requirements of this rule as to the date of filing. Refusal of the board to waive such requirement shall be subject to supreme court review. If the registration is not on file by the January 15 registration deadline set forth in rule 31.2(1), but is on file by December 1 immediately preceding the registrant's July examination or July 1 immediately preceding the registrant's February examination, the registration fee will be \$150. If the registration is not timely filed, but is on file by April 1 immediately preceding the registrant's July examination or November 1 immediately preceding the registrant's February examination, the registration fee will be \$250. This fee is not refundable and shall be in addition to the fee required under rule 31.6. The failure to file the registration by the January 15 deadline of rule 31.2(1) may result in delays in conducting the board's character and fitness investigation. The board will not expedite its character and fitness investigation because the registration form is not timely filed. The board may conclude the registrant should not be permitted to take the bar examination until the investigation is completed. The registrant will not be eligible for admission to the bar until the character and fitness process is completed.
- **31.2(3)** Registration as a law student under this rule is not deemed an application for permission to take the bar examination.
- **31.2(4)** The registration shall be accompanied by letters prepared by three persons not related to applicant by consanguinity or affinity attesting to the registrant's good moral character. The letters must be signed and shall include contact information for the reference provider. The letters shall state how the reference knows the registrant, how long the reference has known the registrant, and the basis for concluding the registrant possesses good moral character.
- **31.2(5)** The board shall review each registration and may require the personal presence of any registrant at such time and place as the board may prescribe for interview and examination concerning the registrant's character and fitness. The board may at any time find it advisable to make further inquiry into the character, fitness, and general qualifications of the registrant, and with regard to each registration, the board shall have all of the powers given it in respect to inquiry and investigation of candidates for admission to the bar.

[Court Order July 2, 1975; September 20, 1976; December 16, 1983—received for publication May 30, 1984; February 16, 1990, effective March 15, 1990; April 16, 1992, effective July 1, 1992; March 26, 1993,

effective July 1, 1993; December 2, 1993; June 5, 1996, effective July 1, 1996; (Prior to July 1, 1996, Court Rule 112); November 9, 2001, effective February 15, 2002; June 5, 2008, effective July 1, 2008; April 9, 2009; December 10, 2012; August 21, 2013; April 25, 2014]

Rule 31.3 Required examinations.

- **31.3(1)** *Iowa bar examination.* Beginning with the February 2009 administration of the Iowa bar examination, the provisions of this rule shall apply to the dates and content of the bar examination.
- a. Written examinations for admission to the bar shall be held in Polk County, Iowa, commencing with a mandatory orientation session on the Monday preceding the last Wednesday in February and on the Monday preceding the last Wednesday in July.
- b. The examination shall consist of three components: the Multistate Essay Examination (MEE), the Multistate Bar Examination (MBE), and the Multistate Performance Test (MPT). There shall be one three-hour MEE session consisting of six questions, one MPT session consisting of two 90-minute performance tests, and two MBE sessions consisting of 100 multiple-choice questions each. The MEE portion of the examination shall consist of questions selected by the board from the following subjects:
 - (1) Business associations
 - 1. Agency and partnership
 - 2. Corporations and LLCs
 - (2) Conflict of laws
 - (3) Constitutional law (Federal)
 - (4) Contracts (including Uniform Commercial Code (Sales) (Art. 2))
 - (5) Criminal law and procedure
 - (6) Evidence (based on the Federal rules of evidence)
 - (7) Family law
 - (8) Federal civil procedure
 - (9) Real property
 - (10) Torts
 - (11) Trusts and Estates
 - 1. Decedents' estates
 - 2. Trusts and future interests
 - (12) Uniform Commercial Code
 - 1. Negotiable instruments (Commercial Paper) (Art. 3)
 - 2. Secured transactions (Art. 9)

Some MEE questions may include issues from more than one area of law. Conflict of laws issues are embedded in the other MEE topic areas. They do not appear as stand-alone questions. Uniform Commercial Code issues may require the applicants to know the general principles and applicable definitions set forth in Art. 1. Complete subject matter outlines for the MEE are available on the website of National Conference of Bar Examiners.

- c. Applicants must achieve a combined scaled score of 266 or above in order to pass the examination. All passes and all failures shall be on a vote of at least four members of the board of law examiners admitted to practice law in Iowa.
- **31.3(2)** Multistate Professional Responsibility Examination. Every applicant for admission to practice law in the state of Iowa must have on file with the assistant director examination results from the Multistate Professional Responsibility Examination (MPRE) administered by the National Conference of Bar Examiners no later than April 1 preceding the July examination or November 1 preceding the February examination. Each applicant must obtain a scaled score of at least 80 in order to be admitted to practice law in Iowa. MPRE scores shall only be accepted for three years after the date the MPRE is taken.

It is the responsibility of the applicant to ensure that a score report from the National Conference of Bar Examiners is sent to the assistant director by the date indicated above. An applicant who cannot meet the deadline for posting a passing MPRE score must file a petition asking for permission to post a passing score after the deadline. The petition must state why the score could not be timely posted and indicate when the applicant will take the MPRE. A petition to post the score prior to the examination may be addressed by the board, but a petition to post a score after the examination must be addressed by the supreme court.

[Court Order July 2, 1975; September 17, 1984; October 23, 1985, effective November 1, 1985; January 3, 1996; June 5, 1996, effective July 1, 1996; (Prior to July 1, 1996, Court Rule 101); July 26, 1996; September

12, 1996; October 3, 1997; July 11, 2000; November 9, 2001, effective February 15, 2002; August 28, 2006; June 5, 2008, effective July 1, 2008; September 17, 2008; December 10, 2012]

Rule 31.4 Transfer and banking of MBE scaled scores.

- **31.4(1)** Applicants may transfer any MBE scaled score they received in another jurisdiction from one of the last four administrations of the MBE immediately preceding the deadline for filing the application for the Iowa bar examination. Applicants must indicate their intent to transfer an MBE score on their bar application. The applicant's MBE score from a prior examination must be certified from the other jurisdiction or the National Conference of Bar Examiners by November 1 preceding the February examination and by April 1 preceding the July examination. Applicants may not transfer MBE scaled scores from a concurrent administration of the test.
- **31.4(2)** Applicants may rely upon an MBE scaled score obtained on one of the last four Iowa bar examination administrations immediately preceding the deadline for filing the application for a subsequent bar examination. Applicants choosing to rely upon their prior MBE scaled score shall indicate their intention on the bar application form.
- **31.4(3)** Applicants who choose to rely on a transferred or banked MBE scaled score shall only be required to take the MPT and MEE portions of the bar examination. Such applicants will not be permitted to take the MBE portion of the examination. Applicants who fail to meet the above deadlines for indicating their intention to transfer or bank MBE scores will not be allowed to do so and must sit for all portions of the Iowa examination. It is the applicant's responsibility to ensure that the scaled MBE score is sent to the assistant director by the pertinent date indicated above. [Court Order June 5, 1996, effective July 1, 1996; (Prior to July 1, 1996, Court Rule 102); November 9, 2001, effective February 15, 2002; June 5, 2008, effective July 1, 2008; September 17, 2008]

Rule 31.5 Bar examination application—contents and deadlines.

- **31.5(1)** The board of law examiners and the assistant director shall prepare such forms as may be necessary for application for examination. The application shall require the applicant to demonstrate the applicant is a person of honesty, integrity, and trustworthiness, and one who appreciates and will adhere to the Iowa Rules of Professional Conduct as adopted by the supreme court, together with such other information as the board and the assistant director determine necessary and proper.
- **31.5(2)** Every applicant for admission to the bar shall make application, under oath, and upon a form furnished by the assistant director. The applicant shall file the application with the assistant director no later than April 1 preceding the July examination or November 1 preceding the February examination. An applicant who fails the Iowa bar examination and wants to take the next examination must file a new application within the above deadlines or within 30 days of the date the applicant's score is posted in the office of professional regulation, whichever is later. There shall be no waiver of these deadlines. If any changes occur after the application is filed that affect the applicant's answers, the applicant must amend the application. A new and complete application shall be filed for each examination for admission.
- **31.5(3)** The board may designate portions of the data submitted for this purpose by the applicant or third parties as a confidential record. The board and the assistant director shall segregate that portion of the application data deemed confidential from the portion which is filed as a public record. In the event of a request for a hearing on character or fitness under rule 31.11(4) following an initial determination by the board, it may designate any additional information received at the hearing and all proceedings before the board as a confidential record.
- [Court Order October 14, 1968; July 2, 1975; November 21, 1977; March 20, 1987, effective June 1, 1987; February 16, 1990, effective March 15, 1990; March 26, 1993, effective July 1, 1993; June 5, 1996, effective July 1, 1996; (Prior to July 1, 1996, Court Rule 103); November 9, 2001, effective February 15, 2002; April 20, 2005, effective July 1, 2005; June 20, 2007, effective July 1, 2007; June 5, 2008, effective July 1, 2008; September 17, 2008; December 10, 2012]
- Rule 31.6 Fee. Every applicant for admission to the bar upon examination shall, as a part of the application, remit to the Iowa board of law examiners an application fee. For applicants not previously admitted to practice law in any other state or the District of Columbia, the fee shall be \$425. For applicants previously admitted to practice law in another state or the District of Columbia, the fee shall be \$525. This fee is not refundable and cannot be applied to a subsequent application. [Court Order July 2, 1975; December 16, 1983—received for publication May 30, 1984; April 16, 1992, effective July 1, 1992; March 26, 1993, effective July 1, 1993; June 5, 1996, effective July 1, 1996; (Prior

to July 1, 1996, Court Rule 113); October 11, 2001; November 9, 2001, effective February 15, 2002; August 21, 2013]

Rule 31.7 Affidavit of intent to practice. All applicants for the Iowa bar examination shall demonstrate a bona fide intention to practice law in Iowa. This showing must be by affidavit made before an officer authorized to administer oaths and having a seal.

The affidavit must include the applicant's designation of the clerk of the supreme court as the applicant's agent for service of process in Iowa for all purposes.

[Court Order July 2, 1975; November 21, 1977; October 28, 1982; December 30, 1983; April 25, 1985; March 23, 1994, effective July 1, 1994; June 5, 1996, effective July 1, 1996; (Prior to July 1, 1996, Court Rule 105); November 9, 2001, effective February 15, 2002]

Rule 31.8 Degree requirement. No person shall be permitted to take the examination for admission without proof that the person has received the degree of LL.B. or J.D. from a reputable law school fully approved by the American Bar Association. Proof of this requirement shall be by affidavit of the dean of such law school, and shall show that the applicant has actually and in good faith pursued the study of law resulting in the degree required by this rule. The affidavit must be made before an officer authorized to administer oaths and having a seal.

If an applicant is a student in such a law school and expects to receive the degree of LL.B. or J.D. within 45 days from the first day of the July or February examination, the applicant shall be permitted to take the examination upon the filing of an affidavit by the dean of said school stating that the dean expects the applicant to receive such a degree within this time. No certificate of admission or license to practice law shall be issued until the applicant has received the required degree. If the applicant fails to obtain the degree within the 45-day period, the results of the applicant's examination shall be null and void.

[Court Order July 15, 1963; February 9, 1967; December 30, 1971; February 15, 1973; July 2, 1975; November 21, 1977; June 13, 1983; June 5, 1996, effective July 1, 1996; (Prior to July 1, 1996, Court Rule 106); May 2, 1997; November 9, 2001, effective February 15, 2002]

Rule 31.9 Moral character and fitness.

- 31.9(1) The Iowa board of law examiners shall make an investigation of the moral character and fitness of any applicant and may procure the services of any bar association, agency, organization, or individual qualified to make a moral character or fitness report.
- a. Immediately upon the filing of the application, the chair of the Iowa board of law examiners shall notify the president of a local bar association and the county attorney of the county in which the applicant resides of the filing of the application. If either of said officers is possessed of information which reflects adversely on the moral character or fitness of the applicant, such information shall be transmitted to the chair of the board of law examiners not less than 60 days in advance of the holding of the examination.
- b. The Iowa board of law examiners shall, subject to supreme court review, determine whether or not the applicant is of good moral character and fitness. In making its determination, the board shall consider the applicant's candor in the application process and in any interactions with the board or its staff.
- **31.9(2)** Denial of permission to take bar examination; denial of recommendation for admission. When the board of law examiners determines that any person who registers or makes application should not be permitted to take a bar examination, or that an applicant who has passed a bar examination should not be recommended for admission to practice law in Iowa, the board shall notify the applicant in writing of its determination.
- a. The notice shall provide that the applicant is entitled to a hearing to challenge the determination upon filing a written request for hearing with the assistant director within 10 days after service of the
- b. The assistant director shall serve the notice on the applicant by mail to the address shown on the applicant's application.
- c. If no request for hearing is filed, the board's determination shall be final and not subject to
- d. If a request for hearing is filed, the chair of the board shall appoint an attorney member of the board to act as a hearing officer. The hearing officer shall promptly set a hearing, and the assistant

director shall notify the applicant by mail at least 10 days before the hearing date of the time and place of hearing.

- e. Not less than 10 days before the hearing date, the board shall furnish the applicant with copies of all document and summaries of all other information the board relied on in making its determination.
- f. The clerk of court in the county where the hearing is held shall have authority to issue any necessary subpoenas for the hearing.
- g. At the hearing, the applicant shall have the right to appear in person and by counsel. The board may be represented by the attorney general of the state of Iowa or a duly appointed assistant attorney general. The hearing shall be reported. The hearing officer shall take judicial notice of the information the board considered in the case and shall consider such additional evidence and arguments as may be presented at the hearing. At the hearing, the board shall first present any additional evidence or information that it deems necessary to the proceeding. Thereafter the applicant shall present evidence. The attorney for the board may offer rebuttal evidence at the discretion of the hearing officer. In presiding at the hearing, the hearing officer shall have the power and authority administrative hearing officers possess generally.
- h. Within 30 days after completion of the hearing, the hearing officer shall provide the board with a hearing transcript, exhibits, and findings of fact and conclusions of law. Based on this information, the board shall prepare and file its final determination with the assistant director. The assistant director shall, by mail, promptly notify the applicant of the board's final determination.
- 31.9(3) Supreme court review. Any applicant aggrieved by a final determination of the board made pursuant to rule 31.9(2) may file a petition requesting review of the determination in the supreme court within 20 days of the mailing of notice of final determination. The petition must be accompanied by a \$150 fee. If no such petition is filed within the 20-day period, the board's determination shall not be subject to review. A petition for review shall state all claims of error and reasons for challenging the board's determination. The board shall transmit to the supreme court its files and complete record in the case. Unless the court orders otherwise, the petition shall be deemed submitted for the court's review on the record previously made. After consideration of the record, the court shall enter its order sustaining or denying the petition. The order of the court shall be conclusive. No subsequent application for admission by a person denied under rule 31.9(2) shall be considered by the board unless authorized by the court upon the applicant's motion accompanied by a prima facie showing of a substantial change of circumstances.
- **31.9(4)** Costs of review. In the event an applicant or person who is registered petitions for review under rule 31.9(3) and is unsuccessful, the costs of the appeal shall be taxed against the unsuccessful applicant and judgment therefor may be entered in the district court of that person's county of residence, if an Iowa resident, or in the district court for Polk County if a nonresident.
- **31.9(5)** Failure to comply with support order. The supreme court may refuse to issue a license to practice law to an applicant for admission to the bar by examination or on motion who fails to comply with a support order.
- a. Procedure. The Child Support Recovery Unit (CSRU) shall file any certificate of noncompliance that involves an applicant with the clerk of the supreme court. The procedure, including notice to the applicant, shall be governed by Iowa Ct. R. 35.20(1), except that the notice shall refer to a refusal to issue a license to practice law to the applicant instead of a suspension of the attorney's license.
- b. District court hearing. Upon receipt of an application for hearing from the applicant, the clerk of district court shall schedule a hearing to be held within 30 days of the date of filing of the application. All matters pertaining to the hearing shall be governed by Iowa Ct. R. 35.20(2).
- c. Noncompliance certificate withdrawn. If a withdrawal of certificate of noncompliance is filed, the supreme court shall curtail any proceedings pursuant to the certificate of noncompliance, or, if necessary, shall immediately take such steps as are necessary to issue a license to the applicant if the applicant is otherwise eligible under rules of the supreme court.
- d. Sharing information. Notwithstanding the provisions of any other rule or statute concerning the confidentiality of records, the clerk of the supreme court and the director of the office of professional regulation are authorized to share information with the CSRU for the sole purpose of allowing the CSRU to identify applicants subject to enforcement under Iowa Code chapter 252J or 598.
- **31.9(6)** The supreme court may refuse to issue a license to practice law to an applicant for admission to the bar by examination or on motion who defaults on an obligation owed to or collected by the College Student Aid Commission.

- a. Procedure. The College Student Aid Commission (the commission) shall file any certificate of noncompliance that involves an applicant with the clerk of the supreme court. The procedure, including notice to the applicant, shall be governed by Iowa Ct. R. 35.21(1), except that the notice shall refer to a refusal to issue a license to practice law to the applicant instead of a suspension of the attorney's license.
- b. District court hearing. Upon receipt of an application for hearing from the applicant, the clerk of district court shall schedule a hearing to be held within 30 days of the date of filing of the application. All matters pertaining to the hearing shall be governed by Iowa Ct. R. 35.21(2).
- c. Noncompliance certificate withdrawn. If a withdrawal of certificate of noncompliance is filed, the supreme court shall curtail any proceedings pursuant to the certificate of noncompliance, or, if necessary, shall immediately take such steps as are necessary to issue a license to the applicant if the applicant is otherwise eligible under rules of the court.
- **31.9(7)** The supreme court may refuse to issue a license to practice law to an applicant for admission to the bar by examination or on motion who defaults on an obligation owed to or collected by the Centralized Collection Unit of the Department of Revenue (CCU).
- a. Procedure. The CCU shall file any certificate of noncompliance that involves an applicant with the clerk of the supreme court. The procedure, including notice to the applicant, shall be governed by Iowa Ct. R. 35.22(1), except that the notice shall refer to a refusal to issue a license to practice law to the applicant instead of a suspension of the attorney's license.
- b. District court hearing. Upon receipt of an application for hearing from the applicant, the clerk of the district court shall schedule a hearing to be held within 30 days of the date of filing of the application. All matters pertaining to the hearing shall be governed by Iowa Ct. R. 35.22(2).
- c. Noncompliance certificate withdrawn. If a withdrawal of a certificate of noncompliance is filed, the supreme court shall curtail any proceedings pursuant to the certificate of noncompliance, or, if necessary, shall immediately take such steps as are necessary to issue a license to the applicant if the applicant is otherwise eligible under rules of the supreme court.
- d. Sharing information. Notwithstanding the provisions of any other rule or statute concerning the confidentiality of records, the clerk of the supreme court and the director of the office of professional regulation are authorized to share information with the CCU for the sole purpose of allowing the CCU to identify applicants subject to enforcement under Iowa Code chapter 272D. [Court Order July 2, 1975; June 5, 1996, effective July 1, 1996; (Prior to July 1, 1996, Court Rule 104); December 20, 1996; November 25, 1998; November 9, 2001, effective February 15, 2002; April 20, 2005, effective July 1, 2005; June 5, 2008, effective July 1, 2008; February 20, 2012; December 10, 2012]

Rule 31.10 Preservation of anonymity. Each applicant permitted to take the bar examination shall be randomly assigned a number at the beginning of the examination, by which number the applicant shall be known throughout the examination.

Either the assistant director or the director of the office of professional regulation, or their representatives, shall prepare a list of the applicants, showing the number assigned to each at the beginning of the examination, certify to such facts, seal said list in an envelope immediately after the beginning of said examination and retain the same sealed, in their possession, unopened until after the applicant's score has been properly recorded. The envelope shall then be opened in the presence of the Iowa board of law examiners and the correct name entered opposite the number assigned to each applicant, in the presence of the Iowa board of law examiners.

[Court Order July 2, 1975; June 5, 1996, effective July 1, 1996; (Prior to July 1, 1996, Court Rule 107); November 9, 2001, effective February 15, 2002; June 5, 2008, effective July 1, 2008]

Rule 31.11 Automatic review.

- **31.11(1)** *Score range for review.* An applicant whose combined, scaled score on the current examination is at least 260, but less than 266, shall have an automatic review of the written portion of the bar examination prior to release of the bar examination results.
- **31.11(2)** *Procedures for automatic review.* The board shall apply the following procedures for applicants eligible for an automatic review:
- a. The attorney members of the board and any temporary examiners the board may designate will review the applicant's written answers. The answers shall be submitted on an anonymous basis without oral argument or hearing. If it appears that an answer should receive a different score (whether higher or lower), that score will be used to determine the applicant's scaled score. The board shall maintain a record of any changes made to the scoring of the individual questions on review.

- b. Following its review, the board shall recommend to the supreme court that the applicant be admitted to the practice of law in Iowa if the applicant's combined, scaled score after review is at least 266. An applicant whose combined, scaled score after review is 265 or below shall be deemed to have failed the examination.
- **31.11(3)** Supreme court review. An unsuccessful applicant whose combined, scaled score on the bar examination is at least 260, but less than 266, may file a petition requesting review of the board's determination in the supreme court. However, the board's decision regarding an applicant's score is final and will not be reviewed by the court absent extraordinary circumstances. "Extraordinary circumstances" would include issues such as the board's refusal to correct a clear mathematical error, but would not include a claim that the board erred in the grade assigned to a particular answer. The petition shall be filed with the clerk of the supreme court and served upon the board. The petition must be filed within 20 days of the date the applicant's score is posted in the office of professional regulation and must be accompanied by a \$150 fee. If no such petition is filed within the 20-day period, the board's determination shall not be subject to review. The petition for review shall identify in detail the extraordinary circumstances requiring supreme court review of the board's determination. Upon request of the court, the board shall transmit to the supreme court the complete record in the case. Unless the court orders otherwise, the petition shall be deemed submitted for the court's review on the record previously made. After consideration of the record, the court shall enter its order sustaining or denying the petition. The order of the court shall be conclusive. All documents submitted for the court's review, other than the applicant's petition, shall be confidential.

[Court Order July 2, 1975; September 20, 1976; April 25, 1985; March 31, 1986, effective May 1, 1986; April 17, 1990, effective June 1, 1990; June 5, 1996, effective July 1, 1996; (Prior to July 1, 1996, Court Rule 117.1) July 19, 1999; November 9, 2001, effective February 15, 2002; June 20, 2007, effective July 1, 2007; June 5, 2008, effective July 1, 2008; February 20, 2012; July 13, 2012]

Rule 31.12 Admission of attorneys from other jurisdictions—requirements and fees.

- **31.12(1)** An applicant who meets the requirements of this rule and rule 31.13 may, in the discretion of the court, be admitted to the practice of law in this state without examination.
- **31.12(2)** The applicant shall file the application with the National Conference of Bar Examiners through their online character and fitness application process unless an exception is granted by the Office of Professional Regulation. The applicant shall pay a nonrefundable administrative fee of \$525 to the Office of Professional Regulation at the time of filing the application. The character investigation services of the National Conference of Bar Examiners shall be procured in all cases where application for admission on motion is made. The applicant shall pay the investigative fee required by the National Conference of Bar Examiners at the time of filing the application.
- **31.12(3)** The application and supporting affidavits, which shall contain specific facts and details as opposed to conclusions and which shall be made before an officer authorized to administer oaths, must demonstrate the following:
- a. The applicant has been admitted to the bar of any other state of the United States or the District of Columbia, has practiced law five full years while licensed within the seven years immediately preceding the date of the application, and still holds a license.
- b. The applicant is a person of honesty, integrity, and trustworthiness, and one who will adhere to the Iowa Rules of Professional Conduct. In evaluating this factor the court may consider any findings filed with the Office of Professional Regulation by the Commission on the Unauthorized Practice of Law pursuant to Iowa Ct. R .37.3.
 - c. The applicant is not currently subject to lawyer discipline in any other jurisdiction.
- **31.12(4)** The applicant shall provide such information as the court deems necessary and proper in connection with the application. If any changes occur that affect the applicant's answers, the applicant must immediately amend the application.
 - **31.12(5)** The applicant shall designate the supreme court clerk for service of process.
 - **31.12(6)** For purposes of this rule, the practice of law shall include the following activities:
 - a. Representation of one or more clients in the practice of law.
 - b. Service as a lawyer with a local, state, or federal agency.
- c. The teaching of law as a full-time instructor in a law school approved by the Council of the Section of Legal Education and Admissions to the Bar of the American Bar Association in this state or some other state.
- d. The discharge of actual legal duties as a member of one of the armed services of the United States, if certified as the practice of law by the judge advocate general of such service.

- e. Service as a judge in a federal, state, or local court of record.
- f. Service as a judicial law clerk.
- g. Service as corporate counsel.
- h. Service as an employee or officer of any business, but only if such service would ordinarily constitute the practice of law and was performed in a jurisdiction in which the applicant has been admitted to practice.
- **31.12(7)** For purposes of this rule, the practice of law shall not include work that, as undertaken, constituted the unauthorized practice of law in the jurisdiction in which it was performed or in the jurisdiction in which the clients receiving the unauthorized services were located.
 - **31.12(8)** The following applicants shall not be eligible for admission on motion:
- a. An applicant who has failed a bar examination administered in this state within five years of the date of filing of the application under this rule.
 - b. An applicant who has failed five or more bar examinations.
- c. An applicant whose Iowa license is in exempt or inactive status under the provisions of rule 39.7 or rule 41.7.
- d. An applicant who has been disbarred and not reinstated or whose license is currently suspended in any other jurisdiction.

[Court Order July 2, 1975; September 20, 1976; February 12, 1981; Note September 30, 1981; Court Order December 17, 1982; December 30, 1983; April 23, 1985; November 8, 1985; March 31, 1986, effective May 1, 1986; November 21, 1991, effective January 2, 1992; November 30, 1994, effective January 3, 1995; January 17, 1995, effective March 1, 1995; June 5, 1996, effective July 1, 1996; (Prior to July 1, 1996, Court Rule 114); May 2, 1997; October 11, 2001; November 9, 2001, effective February 15, 2002; February 22, 2002; April 20, 2005, effective July 1, 2005; August 6, 2007; February 14, 2008, effective April 1, 2008; October 15, 2008; August 10, 2009; January 19, 2010; July 13, 2012; December 10, 2012; August 21, 2013]

Rule 31.13 Proofs of qualifications; oath or affirmation.

- 31.13(1) Required certificates, affidavit, and fingerprint card. The following proofs must be filed with the office of professional regulation to qualify an applicant for admission under rule 31.12:
 - a. A certificate of admission in the applicant's state of licensure.
- b. A certificate of a clerk or judge of a court of record, or of a judge advocate general or an administrative law judge, that the applicant was regularly engaged in the practice of law in said state for at least five of the last seven years immediately preceding the date of the application. If, due to the nature of the applicant's practice, the applicant cannot obtain a certificate from a clerk, judge, judge advocate general, or an administrative law judge, the applicant shall file a petition seeking leave to file an alternative certificate demonstrating good cause why the certificate cannot be obtained. If the supreme court grants the petition, the applicant shall file an affidavit detailing the nature, dates, and locations of the applicant's practice, along with an affidavit of a supervising attorney or another lawyer attesting to the applicant's practice over that period.
- c. A certificate of an applicant's good moral character from a judge or clerk of the Iowa district court or of a court where the applicant has practiced within the last five years.
 - d. A completed fingerprint card.
 - 31.13(2) Oath or affirmation.
- a. An applicant whose application for admission without examination is granted must appear for admission before a supreme court justice unless the supreme court orders otherwise based upon a satisfactory showing of exceptional circumstances.
- b. An applicant may file a petition seeking permission to be administered the lawyer's oath or affirmation in the jurisdiction in which the applicant is currently licensed or before a judge advocate general if the applicant is currently a member of one of the armed services of the United States. The petition must set forth in detail: the exceptional circumstances that render the applicant unable to appear for admission before a justice of the supreme court of Iowa; the name, title, business address, and telephone number of the justice, judge, clerk of court, court administrator, or the judge advocate general who will administer the lawyer's oath or affirmation; and the statute or court rule authorizing that person to administer an oath or affirmation.
- c. If the supreme court grants the petition, the office of professional regulation shall forward all required documents to the applicant. The applicant will be deemed admitted to the Iowa bar on the date the completed documents are filed with the office of professional regulation.

d. The applicant must take the lawyer's oath or affirmation from an Iowa justice, or file the completed paperwork from an out-of-state oath or affirmation, within six months after the date the application for admission on motion is granted or the application will be deemed to be denied. [Court Order July 2, 1975; December 30, 1982; December 30, 1983; April 23, 1985; November 8, 1985; January 17, 1995, effective March 1, 1995; June 5, 1996, effective July 1, 1996; (Prior to July 1, 1996, Court Rule 115); November 9, 2001, effective February 15, 2002; May 31, 2006; October 31, 2006; February 14, 2008, effective April 1, 2008; October 15, 2008; January 19, 2010; December 10, 2012]

Rule 31.14 Admission pro hac vice before Iowa courts and administrative agencies.

31.14(1) *Definitions.*

- a. An "out-of-state" lawyer is a person who:
- (1) Is not admitted to practice law in this state but who is admitted in another state or territory of the United States or of the District of Columbia, or is licensed to practice as a foreign legal consultant in any state or territory of the United States or of the District of Columbia; and
 - (2) Is not disbarred or suspended from practice in any jurisdiction.
- b. An out-of-state lawyer is "eligible" for admission pro hac vice if any of the following conditions are satisfied:
- (1) The lawyer lawfully practices solely on behalf of the lawyer's employer and its commonly owned organizational affiliates, regardless of where such lawyer may reside or work.
 - (2) The lawyer neither resides nor is regularly employed at an office in this state.
- (3) The lawyer resides in this state but (i) lawfully practices from offices in one or more other states and (ii) practices no more than temporarily in this state, whether pursuant to admission pro hac vice or in other lawful ways.
- c. An "in-state" lawyer is a person admitted to practice law in this state and is not disbarred or suspended from practice in this state.
- d. A "client" is a person or entity for whom the out-of-state lawyer has rendered services or by whom the lawyer has been retained prior to the lawyer's performance of services in this state.
- e. "This state" refers to Iowa. This rule does not govern proceedings before a federal court or federal agency located in this state unless that body adopts or incorporates this rule.
 - 31.14(2) Authority of court or agency to permit appearance by out-of-state lawyer.
- a. Court proceeding. A court of this state may, in its discretion, admit an eligible out-of-state lawyer, who is retained to appear as attorney of record in a particular proceeding, only if the out-of-state lawyer appears with an in-state lawyer in that proceeding.
- b. Administrative agency proceeding. If practice before an agency of this state is limited to lawyers, the agency may, using the same standards and procedures as a court, admit an eligible out-of-state lawyer who has been retained to appear in a particular agency proceeding as counsel in that proceeding pro hac vice, only if the out-of-state lawyer appears with an in-state lawyer in that proceeding.
- c. Subsequent proceedings. Admission pro hac vice is limited to the particular court or agency proceeding for which admission was granted. An out-of-state lawyer must separately seek admission pro hac vice in any subsequent district or appellate court proceeding.
- **31.14(3)** *In-state lawyer's duties.* When an out-of-state lawyer appears for a client in a proceeding pending in this state, either in the role of co-counsel of record with the in-state lawyer, or in an advisory or consultative role, the in-state lawyer who is co-counsel or counsel of record for that client in the proceeding remains responsible to the client and responsible for the conduct of the proceeding before the court or agency. It is the duty of the in-state lawyer to do all of the following:
 - a. Appear of record together with the out-of-state lawyer in the proceeding.
 - b. Actively participate in the proceeding. See Iowa R. of Prof'l Conduct 32:5.5(c)(1).
 - c. Accept service on behalf of the out-of-state lawyer as required by Iowa Code section 602.10111.
- d. Advise the client of the in-state lawyer's independent judgment on contemplated actions in the proceeding if that judgment differs from that of the out-of-state lawyer.
- **31.14(4)** Application procedure. An eligible out-of-state lawyer seeking to appear in a proceeding pending in this state as counsel pro hac vice shall file a verified application with the court or agency where the litigation is filed. The out-of-state lawyer shall serve the application on all parties who have appeared in the proceeding, and shall include proof of service. Application forms for admission pro hac vice can be found in rule 31.25.
- **31.14(5)** Required information for application. An application filed by the out-of-state lawyer shall contain all of the following information:

- a. The out-of-state lawyer's residence and business addresses.
- b. The name, address, and phone number of each client sought to be represented.
- c. The courts before which the out-of-state lawyer has been admitted to practice and the respective period of admission and any jurisdiction in which the out-of-state lawyer has been licensed to practice as a foreign legal consultant and the respective period of licensure.
- d. Whether the out-of-state lawyer has been denied admission pro hac vice in this state. If so, specify the caption of the proceedings, the date of the denial, and what findings were made.
- e. Whether the out-of-state lawyer has had admission pro hac vice revoked in this state. If so, specify the caption of the proceedings, the date of the revocation, and what findings were made.
- f. Whether the out-of-state lawyer has been denied admission in any jurisdiction for reasons other than failure of a bar examination. If so, specify the jurisdiction, caption of the proceedings, the date of the denial, and what findings were made.
- g. Whether the out-of-state lawyer has been formally disciplined or sanctioned by any court in this state. If so, specify the nature of the allegations, the name of the authority bringing such proceedings, the caption of the proceedings, the date filed, what findings were made, and what action was taken in connection with those proceedings.
- h. Whether the out-of-state lawyer has been the subject of any injunction, cease-and-desist letter, or other action arising from a finding that the out-of-state lawyer engaged in the unauthorized practice of law in this state or elsewhere. If so, specify the nature of the allegations, the name of the authority bringing such proceedings, the caption of the proceedings, the date filed, what findings were made, and what action was taken in connection with those proceedings.
- i. Whether any formal, written disciplinary proceeding has been brought against the out-of-state lawyer by a disciplinary authority or unauthorized practice of law commission in any other jurisdiction within the last five years, and as to each such proceeding: the nature of the allegations, the name of the person or authority bringing such proceedings, the date the proceedings were initiated and finally concluded, the style of the proceedings, and the findings made and actions taken in connection with those proceedings.
- j. Whether the out-of-state lawyer has been placed on probation by a disciplinary authority in any other jurisdiction. If so, specify the jurisdiction, caption of the proceedings, the terms of the probation, and what findings were made.
- k. Whether the out-of-state lawyer has been held formally in contempt or otherwise sanctioned by any court in a written order in the last five years for disobedience to its rules or orders, and, if so: the nature of the allegations, the name of the court before which such proceedings were conducted, the date of the contempt order or sanction, the caption of the proceedings, and the substance of the court's rulings. A copy of the written order or transcript of the oral rulings shall be attached to the application.
- l. The name and address of each court or agency and a full identification of each proceeding in which the out-of-state lawyer has filed an application to appear pro hac vice in this state within the preceding two years, the date of each application, and the outcome of the application.
- m. An averment as to the out-of-state lawyer's familiarity with the rules of professional conduct, the disciplinary procedures of this state, the standards for professional conduct, the applicable local rules, and the procedures of the court or agency before which the out-of-state lawyer seeks to practice.
- n. The name, address, telephone number, and personal identification number of an in-state lawyer in good standing of the bar of this state who will sponsor the out-of-state lawyer's pro hac vice request.
- o. An acknowledgement that service upon the in-state lawyer in all matters connected with the proceedings has the same effect as if personally made upon the out-of-state lawyer.
- p. If the out-of-state lawyer has appeared pro hac vice in this state in five proceedings within the preceding two years, the application shall contain a statement showing good cause why the out-of-state attorney should be admitted in the present proceeding.
- q. Any other information the out-of-state lawyer deems necessary to support the application for admission pro hac vice.
- 31.14(6) Objection to application. A party to the proceeding may file an objection to the application or seek the court's or agency's imposition of conditions to its being granted. The objecting party must file with its objection a verified affidavit containing or describing information establishing a factual basis for the objection. The objecting party may seek denial of the application or modification of it. If the application has already been granted, the objecting party may move that the pro hac vice admission be revoked.

- **31.14(7)** Standard for admission. The courts and agencies of this state have discretion as to whether to grant applications for admission pro hac vice. If there is no opposition, the court or agency has the discretion to grant or deny the application summarily. An application ordinarily should be granted unless the court or agency finds one of the following:
- a. The admission of the out-of-state attorney pro hac vice may be detrimental to the prompt, fair, and efficient administration of justice.
- b. The admission of the out-of-state attorney pro hac vice may be detrimental to legitimate interests of parties to the proceedings other than a client the out-of-state lawyer proposes to represent.
- c. One or more of the clients the out-of-state lawyer proposes to represent may be at risk of receiving inadequate representation and cannot adequately appreciate that risk.
- d. The out-of-state lawyer has appeared pro hac vice in this state in five proceedings within the preceding two years, unless the out-of-state lawyer can show good cause exists for admission.
- **31.14(8)** *Revocation of admission.* Admission to appear as counsel pro hac vice in a proceeding may be revoked for any of the reasons listed in rule 31.14(7).
 - **31.14(9)** *Discipline, contempt, and sanction authority over the out-of-state lawyer.*
- a. During the pendency of an application for admission pro hac vice and upon the granting of such application, an out-of-state lawyer submits to the authority of the courts of this state, the agencies of this state, and the Iowa Supreme Court Attorney Disciplinary Board for all conduct relating in any way to the proceeding in which the out-of-state lawyer seeks to appear. The out-of-state lawyer submits to these authorities for all of the lawyer's conduct (i) within the state while the proceeding is pending or (ii) arising out of or relating to the application or the proceeding. An out-of-state lawyer who has pro hac vice authority for a proceeding may be disciplined in the same manner as an in-state lawyer. See Iowa R. Prof'l Conduct 32:8.5.
- b. The authority to which an out-of-state lawyer submits includes, but is not limited to, the enforcement of the rules of professional conduct, the rules of procedure of the Iowa Supreme Court Attorney Disciplinary Board, contempt and sanction procedures, applicable local rules, and court, agency, and board policies and procedures.
- c. An out-of-state lawyer who appears before a court of this state or before an agency of this state when practice is limited to lawyers and who does not obtain admission pro hac vice is engaged in the unauthorized practice of law. See Iowa R. Prof'l Conduct 32:5.5 cmt. 9. If an out-of-state lawyer reasonably expects to be admitted pro hac vice, the lawyer may provide legal services that are in or reasonably related to a pending or potential proceeding before a court or agency in this state. See Iowa R. Prof'l Conduct 32:5.5(c)(2).
- **31.14(10)** Familiarity with rules. An out-of-state lawyer shall become familiar with the rules of professional conduct, the rules of procedure of the Iowa Supreme Court Attorney Disciplinary Board, the standards for professional conduct, local court or agency rules, and the policies and procedures of the court or agency before which the out-of-state lawyer seeks to practice. [Court Order July 2, 1975; June 22, 1976; December 2, 1993; June 5, 1996, effective July 1, 1996; (Prior to July 1, 1996, Court Rule 116); April 1, 1999; November 9, 2001, effective February 15, 2002; April 20,

Rule 31.15 Permitted practice by law students and recent graduates.

2005, effective July 1, 2005; September 27, 2006; March 15, 2007; June 3, 2009]

- **31.15(1)** Law students enrolled in a reputable law school as defined by rule 31.8 and Iowa Code section 602.10102 and certified to the office of professional regulation by the dean of the school to have completed satisfactorily not less than the equivalent of three semesters of the work required by the school to qualify for the J.D. or LL.B. degree, may, under the following conditions, engage in the practice of law or appear as counsel in the trial or appellate courts of this state.
- a. Appearance by students as defense counsel in a criminal matter in any trial court shall be confined to misdemeanors, and the student shall be under the direct supervision of licensed Iowa counsel who shall be personally present.
- b. Appearance by students in matters before the Iowa Supreme Court or the Iowa Court of Appeals shall be under the direct supervision of licensed Iowa counsel who shall be personally present.
- c. Appearance or assistance by students in other matters shall be under the general supervision of licensed Iowa counsel, but such counsel need not be personally present in court unless required by order of the court.
- **31.15(2)** Students who the dean of a reputable law school certifies have completed not less than the equivalent of two semesters of work required to qualify for the J.D. or LL.B. degree may appear in a representative capacity in a contested case proceeding before an administrative agency.

- a. Appearance by students who have completed only two semesters of work shall be under the direct supervision of licensed Iowa counsel who shall be personally present.
- b. Students who have completed at least three semesters may appear in a representative capacity in a contested case proceeding before an administrative agency under the general supervision of licensed Iowa counsel, but such counsel need not be personally present unless required by order of the tribunal.
- **31.15(3)** Except as allowed by rule 31.15(4), students may not engage in the practice of law or appear as counsel in any court of this state or before an administrative agency unless such practice or appearance is part of an educational program approved by the faculty of the students' law school and not disapproved by the Iowa Supreme Court, and such program is supervised by at least one member of the law school's faculty. Students may continue to practice before courts or administrative agencies of this state after completion of an educational program so long as the placement is substantially the same as it was during the educational program, approved by the law school, and performed with the supervision required under rule 31.15(1) and 31.15(2).
- **31.15(4)** Law students may assist licensed Iowa counsel to the same extent as a non-attorney without being part of an educational program or being certified to the office of professional regulation, but the students shall be under the general supervision of licensed Iowa counsel who need not be personally present. Law students may not appear in representative capacities in contested case proceedings before administrative agencies without complying with rule 31.15(2) and 31.15(3), or before trial or appellate courts without complying with rule 31.15(1).
- **31.15(5)** Law students shall not receive compensation other than general compensation from an employer-attorney or from a law-school-administered fund.
- **31.15(6)** Graduates of reputable law schools who have applied to take the Iowa bar examination are authorized to perform all activities described in this rule on behalf of the public defender's office, the attorney general's office, county attorney offices, or approved legal aid organizations under the following conditions:
- a. Supervision of graduates shall be the same as supervision of law students under rule 31.15(1) and 31.15(2), but graduates do not need to meet the requirements of rule 31.15(3).
- b. Graduates may perform under this rule beginning with the receipt of a law school dean's certification of graduation and terminating either upon the withdrawal or denial of their application to take the Iowa bar examination, their failure of the next administration of the Iowa bar examination, or upon the date of the admissions ceremony for those who pass that examination.
- c. Graduates may practice up to 25 hours per week from receipt of a J.D. or LL.B. degree until the administration of the next Iowa bar examination.
- d. Graduates are not limited in hours of practice under this rule from administration of the bar exam until the date the bar exam results are posted for those who fail or the date of the admissions ceremony for those who pass.
- e. Graduates who have failed any state bar examination in the past are not eligible to practice under this provision.
- f. The supervising organizations listed in rule 31.15(6) shall file a certificate with the Office of Professional Regulation of the Iowa Supreme Court (OPR) listing the starting dates for all graduates practicing under rule 31.15(6) and shall file a second certificate indicating when the practice under this rule has terminated.
- **31.15(7)** Approved Legal Aid Organization. For purposes of this rule, an "approved legal aid organization" includes a program sponsored by a bar association, law school, or a not-for-profit legal aid organization, approved by the Iowa Supreme Court, whose primary purpose is to provide legal representation to low-income persons in Iowa.
- a. A legal aid organization seeking approval from the court for the purposes of this rule shall file a petition with OPR certifying that it is a not-for-profit organization and reciting with specificity the following:
 - (1) The structure of the organization and whether it accepts funds from its clients.
 - (2) The major sources of funds the organization uses.
- (3) The criteria used to determine potential clients' eligibility for legal services the organization performs.
 - (4) The types of legal and nonlegal services the organization performs.
- (5) The names of all members of the Iowa bar who are employed by the organization or who regularly perform legal work for the organization.
 - (6) The existence and extent of malpractice insurance that will cover the law student or graduate.

b. An organization designated as an approved legal aid organization under the provisions of rule 31.19(2)(c) is an approved legal aid organization for purposes of this rule.

[Court Order April 4, 1967; May 15, 1972; January 14, 1974; April 8, 1975 [withdrawn]; April 9, 1975; April 8, 1980; April 28, 1987; June 5, 1996, effective July 1, 1996 (Prior to July 1, 1996, Court Rule 120); January 9, 1998, effective February 2, 1998; November 9, 2001, effective February 15, 2002; June 4, 2008, effective July 1, 2008; March 21, 2014]

Rule 31.16 Registration of house counsel.

- **31.16(1)** Who must register. A lawyer who is not admitted to practice law in Iowa, but who is admitted to practice law in another United States jurisdiction, and who has a continuous presence in this jurisdiction and is employed as a lawyer by an organization as permitted pursuant to Rule 32:5.5(d)(1) of the Iowa Rules of Professional Conduct, the business of which is lawful and consists of activities other than the practice of law or the provision of legal services, shall register as house counsel within 90 days of the commencement of employment as a lawyer or, if currently so employed, then within 90 days of the effective date of this rule. For purposes of rule 31.16, "United States jurisdiction" includes the District of Columbia and any state, territory, or commonwealth of the United States
- **31.16(2)** *Procedure for registering.* The lawyer shall submit to the Office of Professional Regulation of the Supreme Court of Iowa the following:
 - a. A completed application in the form the office of professional regulation prescribes.
- b. A nonrefundable application fee in the amount of \$500 payable to the Iowa board of law examiners.
 - c. A \$200 client security assessment payable to the Client Security Commission.
- d. Documents proving admission to practice law and current good standing in all jurisdictions in which the lawyer is admitted to practice law.
- e. A certificate from the disciplinary authority of each jurisdiction of admission stating that the lawyer has not been suspended, disbarred, or disciplined and that no charges of professional misconduct are pending; or that identifies any suspensions, disbarments, or other disciplinary sanctions that have been imposed upon the lawyer, and any pending charges, complaints, or grievances.
- f. An affidavit from an officer, director, or general counsel of the employing entity attesting as follows:
 - (1) The entity will be employing the lawyer;
- (2) To the best of its knowledge the lawyer has been lawfully admitted to practice and is a lawyer in good standing in another United States jurisdiction;
- (3) To the best of its knowledge the lawyer has not been disbarred or suspended from practice in any jurisdiction and has never been convicted of a felony;
- (4) While serving as counsel, the lawyer will perform legal services solely for the corporation, association, or other business, educational, or governmental entity, including its subsidiaries and affiliates;
- (5) While serving as counsel, the lawyer will not provide personal legal services to the entity's officers or employees, except regarding matters directly related to their work for the entity and only to the extent consistent with rule 32:1.7 of the Iowa Rules of Professional Conduct;
- (6) The corporation, association, or other business, educational, or governmental entity is not engaged in the practice of law or provision of legal services; and
- (7) The entity will promptly notify the Client Security Commission of the termination of the lawyer's employment.
 - g. Any other document the supreme court requires to be submitted.
 - **31.16(3)** *Scope of authority of registered lawyer.*
- a. A lawyer registered under this rule shall have the rights and privileges otherwise applicable to members of the bar of this state with the following restrictions:
- (1) The registered lawyer is authorized to provide legal services to the entity client or its organizational affiliates, including entities that control, are controlled by, or are under common control with the employer, and for employees, officers, and directors of such entities, but only on matters directly related to their work for the entity and only to the extent consistent with rule 32:1.7 of the Iowa Rules of Professional Conduct; and
 - (2) The registered lawyer shall not:

- 1. Except as otherwise permitted by the rules of this state, appear before a court or any other tribunal as defined in rule 32:1.0(m) of the Iowa Rules of Professional Conduct. Registration under this rule does not authorize a lawyer to provide services to the employing entity for which pro hac vice admission is required. A lawyer registered under this rule must therefore comply with the requirements for pro hac vice admission under rule 31.14 for any appearances before a court or any administrative agency; or
- 2. Offer or provide legal services or advice to any person other than as described in rule 31.16(3)(a)(1), or hold himself or herself out as being authorized to practice law in this state other than as described in rule 31.16(3)(a)(1).
- b. Notwithstanding the provisions of rule 31.16(3)(a), a lawyer registered under this rule is authorized to provide pro bono legal services through an established not-for-profit bar association, pro bono program or legal services program, or through such organization(s) specifically authorized in this state.
 - c. A lawyer registered under this rule shall:
- (1) File an annual statement and pay the annual disciplinary fee as Iowa Court Rules 39.5 and 39.8 require;
- (2) Commencing January 1, 2013, fulfill the continuing legal education attendance, reporting and fee payment requirements set forth in rules 41.3 and 41.4. However, a lawyer shall not be required to comply with the continuing legal education attendance requirements set forth in rule 41.3 for the calendar year in which the lawyer first registered as house counsel under this rule; and
 - (3) Report to the office of professional regulation within 90 days the following:
 - 1. Termination of the lawyer's employment as described in rule 31.16(2)(f);
 - 2. Whether or not public, any change in the lawyer's license status in another jurisdiction; and
- 3. Whether or not public, any disciplinary charge, finding, or sanction concerning the lawyer by any disciplinary authority, court, or other tribunal in any jurisdiction.
- **31.16(4)** Local discipline. A registered lawyer under this section shall be subject to the Iowa Rules of Professional Conduct and all other laws and rules governing lawyers admitted to the active practice of law in this state. The Iowa Supreme Court Attorney Disciplinary Board has and shall retain jurisdiction over the registered lawyer with respect to the conduct of the lawyer in this state or another jurisdiction to the same extent as it has over lawyers generally admitted in this jurisdiction.
- **31.16(5)** *Automatic termination.* A registered lawyer's rights and privileges under this section automatically terminate when:
 - a. The lawyer's employment terminates;
- b. The lawyer is suspended or disbarred from practice in any jurisdiction or any court or agency before which the lawyer is admitted; or
 - c. The lawyer fails to maintain active status in at least one jurisdiction.
- **31.16(6)** Reinstatement. A registered lawyer whose registration is terminated under rule 31.16(5)(a) above, may be reinstated within 180 days of termination upon submission to the office of professional regulation all of the following:
 - a. An application for reinstatement in a form the office of professional regulation prescribes;
 - b. A reinstatement fee in the amount of \$100; and
 - c. An affidavit from the current employing entity as prescribed in rule 31.16(2)(f).
 - **31.16(7)** Sanctions. A lawyer under this rule who fails to register shall be:
 - a. Subject to professional discipline in this state;
 - b. Ineligible for admission on motion in this state;
- c. Referred by the office of professional regulation to the Iowa Supreme Court Attorney Disciplinary Board; and
- d. Referred by the office of professional regulation to the disciplinary authority of the jurisdictions of licensure.
- **31.16(8)** Court's discretion. The supreme court shall have the discretion to grant or deny an application or to revoke a registration. The court may procure the character investigation services of the National Conference of Bar Examiners, at the lawyer's expense, in any matter in which substantial questions regarding the lawyer's character or fitness to practice law are implicated. The director of the office of professional regulation shall issue a certificate of registration upon the supreme court's approval of the application.
- **31.16(9)** Duration of registration—credit toward admission on motion. A lawyer may practice law in Iowa under this registration provision for a period of up to five years. If the lawyer intends to

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continue practicing law in Iowa, the lawyer must, prior to the expiration of the five-year period, apply for admission on motion. *See* Iowa Ct. R. 31.12. The filing of the application within the five-year period extends the registration period until the lawyer is admitted or the application is denied. The period of time the lawyer practices law in Iowa under the registration provisions of this rule may be used to satisfy the duration-of-practice requirement under rule 31.12(3)(a).

- **31.16(10)** Lawyers registered under prior version of this rule. A lawyer registered under the prior version of this rule shall not be required to register again or pay the registration fee. The adoption of this rule shall not affect any existing five-year period for terminating registration as house counsel and applying for admission on motion. That date shall run from the date of the lawyer's registration as house counsel. All other provisions of this rule shall apply.
- **31.16(11)** Denial of application or suspension of registration for failure to comply with an obligation owed to or collected by the centralized collection unit of the Iowa Department of Revenue. The supreme court may deny a lawyer's application for registration or suspend a lawyer's registration under this rule for failure to comply with an obligation owed to or collected by the centralized collection unit of the Iowa Department of Revenue. Rule 31.9(7) shall govern this procedure.
- **31.16(12)** Denial of application or suspension of registration for failure to comply with an obligation owed to or collected by the College Student Aid Commission. The supreme court may deny a lawyer's application for registration or suspend a lawyer's registration under this rule for failure to comply with an obligation owed to or collected by the College Student Aid Commission. Rule 31.9(6) shall govern this procedure.
- **31.16(13)** Denial of application or suspension of registration for failure to comply with a support order. The supreme court may deny a lawyer's application for registration or suspend a lawyer's registration under this rule for failure to comply with a support order. Rule 31.9(5) shall govern this procedure.

[Court Orders April 20, 2005, and July 1, 2005, effective July 1, 2005; September 1, 2005; June 16, 2006; February 14, 2008, effective April 1, 2008; June 5, 2008, effective July 1, 2008; September 12, 2012; August 21, 2013]

Rule 31.17 Provision of legal services following determination of major disaster.

- **31.17(1)** Determination of existence of major disaster. Solely for purposes of this rule, this court shall determine when an emergency affecting the justice system, as a result of a natural or other major disaster, has occurred in:
- a. This state and whether the emergency caused by the major disaster affects the entirety or only a part of the state, or
- b. Another jurisdiction but only after such a determination and its geographical scope have been made by the highest court of that jurisdiction. The authority to engage in the temporary practice of law in this state pursuant to rule 31.17(3) shall extend only to lawyers who principally practice in the area of such other jurisdiction determined to have suffered a major disaster causing an emergency affecting the justice system and the provision of legal services.
- **31.17(2)** Temporary practice—pro bono services. Following the determination of an emergency affecting the justice system in this state pursuant to rule 31.17(1), or a determination that persons displaced by a major disaster in another jurisdiction and residing in this state are in need of pro bono services and the assistance of lawyers from outside of this state is required to help provide such assistance, a lawyer authorized to practice law in another United States jurisdiction, and not disbarred, suspended from practice or otherwise restricted from practice in any jurisdiction, may provide legal services in this state on a temporary basis. Such legal services must be provided on a pro bono basis without compensation, expectation of compensation or other direct or indirect pecuniary gain to the lawyer. Such legal services shall be assigned and supervised through an established not-for-profit bar association, pro bono program or legal services program or through such organization(s) specifically designated by this court.
- **31.17(3)** Temporary practice—legal services arising out of and reasonably related to a lawyer's practice of law in another jurisdiction, or area of such other jurisdiction, where the disaster occurred. Following the determination of a major disaster in another United States jurisdiction, a lawyer who is authorized to practice law and who principally practices in that affected jurisdiction, and who is not disbarred, suspended from practice or otherwise restricted from practice in any jurisdiction, may provide legal services in this state on a temporary basis. Those legal services must

arise out of and be reasonably related to that lawyer's practice of law in the jurisdiction, or area of such other jurisdiction, where the major disaster occurred.

- **31.17(4)** Duration of authority for temporary practice. The authority to practice law in this state granted by rule 31.17(2) shall end when this court determines that the conditions caused by the major disaster have ended except that a lawyer then representing clients in this state pursuant to rule 31.17(2) is authorized to continue the provision of legal services for such time as is reasonably necessary to complete the representation, but the lawyer shall not thereafter accept new clients. The authority to practice law in this state granted by rule 31.17(3) shall end 60 days after this court declares that the conditions caused by the major disaster in the affected jurisdiction have ended.
- **31.17(5)** *Court appearances.* The authority granted by this rule does not include appearances in court except:
 - a. Pursuant to this court's pro hac vice admission rule; or
- b. If this court, in any determination made under rule 31.17(1), grants blanket permission to appear in all or designated courts of this state to lawyers providing legal services pursuant to rule 31.17(2).
- **31.17(6)** Disciplinary authority and registration requirement. Lawyers providing legal services in this state pursuant to rule 31.17(2) or (3) are subject to this court's disciplinary authority and the Iowa Rules of Professional Conduct as provided in Iowa R. of Prof'l Conduct 8.5. Lawyers providing legal services in this state under rule 31.17(2) or (3) shall, within 30 days from the commencement of the provision of legal services, file a registration statement with the office of professional regulation. A form for the registration statement can be found in rule 31.25. Any lawyer who provides legal services pursuant to this rule shall not be considered to be engaged in the unlawful practice of law in this state.
- **31.17(7)** *Notification to clients.* Lawyers authorized to practice law in another United States jurisdiction who provide legal services pursuant to this rule shall inform clients in this state of the jurisdiction in which they are authorized to practice law, any limits of that authorization, and that they are not authorized to practice law in this state except as permitted by this rule. They shall not state or imply to any person that they are otherwise authorized to practice law in this state.

The comment accompanying this rule explains and illustrates the meaning and purpose of the rule. The comment is intended as a guide to interpretation, but the text of the rule is authoritative.

COMMENT

- [1] A major disaster in this state or another jurisdiction may cause an emergency affecting the justice system with respect to the provision of legal services for a sustained period of time interfering with the ability of lawyers admitted and practicing in the affected jurisdiction to continue to represent clients until the disaster has ended. When this happens, lawyers from the affected jurisdiction may need to provide legal services to their clients, on a temporary basis, from an office outside their home jurisdiction. In addition, lawyers in an unaffected jurisdiction may be willing to serve residents of the affected jurisdiction who have unmet legal needs as a result of the disaster or, though independent of the disaster, whose legal needs temporarily are unmet because of disruption to the practices of local lawyers. Lawyers from unaffected jurisdictions may offer to provide these legal services either by traveling to the affected jurisdiction or from their own offices or both, provided the legal services are provided on a pro bono basis through an authorized not-for-profit entity or such other organization(s) specifically designated by this court. A major disaster includes, for example, a hurricane, earthquake, flood, wildfire, tornado, public health emergency or an event caused by terrorists or acts of war.
- [2] Under rule 31.17(1)(a), this court shall determine whether a major disaster causing an emergency affecting the justice system has occurred in this state, or in a part of this state, for purposes of triggering rule 31.17(2). This court may, for example, determine that the entirety of this state has suffered a disruption in the provision of legal services or that only certain areas have suffered such an event. The authority granted by rule 31.17(2) shall extend only to lawyers authorized to practice law and not disbarred, suspended from practice or otherwise restricted from practice in any other manner in any other jurisdiction.
- [3] Rule 31.17(2) permits lawyers authorized to practice law in another jurisdiction, and not disbarred, suspended from practice or otherwise restricted from practicing law in any other manner in any other jurisdiction, to provide pro bono legal services to residents of this state following a determination of an emergency caused by a major disaster; notwithstanding that they are not otherwise authorized to practice law in this state. Other restrictions on a lawyer's license to practice law that would prohibit that lawyer from providing legal services pursuant to this rule include, but are not limited to, probation, inactive status, disability inactive status or a non-disciplinary administrative suspension for failure to complete continuing legal education or other requirements. Lawyers on probation may be subject to monitoring and specific limitations on their practices. Lawyers on inactive status, despite being characterized in many jurisdictions as being "in good standing," and lawyers on disability inactive status are not permitted to practice law. Public protection warrants exclusion of these lawyers from the authority to provide legal services as defined in this rule. Lawyers permitted to provide legal services pursuant to this rule must do so without fee or other compensation, or expectation thereof. Their service must be provided through an established not-for-profit organization that is authorized to provide legal services either in its own name or that provides representation of clients through employed or cooperating lawyers. Alternatively, this court may instead designate other specific organization(s) through which these legal services may be rendered. Under rule 31.17(2), an emeritus lawyer from another United States jurisdiction may provide pro bono legal services on a temporary basis in this state provided that the emeritus lawyer is authorized to provide pro bono legal services in that jurisdiction pursuant to that jurisdiction's emeritus or pro bono practice rule. Lawyers may also be authorized to provide legal services in this state on a temporary basis under Iowa R. of Prof'l Conduct 32:5.5(c).
- [4] Lawyers authorized to practice law in another jurisdiction, who principally practice in the area of such other jurisdiction determined by this court to have suffered a major disaster, and whose practices are disrupted by a major disaster there, and who are not disbarred, suspended from practice or otherwise restricted from practicing law in any other manner in any other

jurisdiction, are authorized under rule 31.17(3) to provide legal services on a temporary basis in this state. Those legal services must arise out of and be reasonably related to the lawyer's practice of law in the affected jurisdiction. For purposes of this rule, the determination of a major disaster in another jurisdiction should first be made by the highest court of appellate jurisdiction in that jurisdiction. For the meaning of "arise out of and reasonably related to," see Iowa R. of Prof'l Conduct 32:5.5, cmt. [14].

- [5] Emergency conditions created by major disasters end, and when they do, the authority created by rules 31.17(2) and (3) also ends with appropriate notice to enable lawyers to plan and to complete pending legal matters. Under rule 31.17(4), this court determines when those conditions end only for purposes of this rule. The authority granted under rule 31.17(2) shall end upon such determination except that lawyers assisting residents of this state under rule 31.17(2) may continue to do so for such longer period as is reasonably necessary to complete the representation. The authority created by rule 31.17(3) will end 60 days after this court makes such a determination with regard to an affected jurisdiction.
- [6] Rules 31.17(2) and (3) do not authorize lawyers to appear in the courts of this state. Court appearances are subject to the pro hac vice admission rules of this court. This court may, in a determination made under rule 31.17(5)(b), include authorization for lawyers who provide legal services in this state under rule 31.17(2) to appear in all or designated courts of this state without need for such pro hac vice admission. A lawyer who has appeared in the courts of this state pursuant to rule 31.17(5) may continue to appear in any such matter notwithstanding a declaration under rule 31.17(4) that the conditions created by major disaster have ended. Furthermore, withdrawal from a court appearance is subject to Iowa R. of Prof'l Conduct 32.1.16
- [7] Authorization to practice law as a foreign legal consultant or in-house counsel in a United States jurisdiction offers lawyers a limited scope of permitted practice and may therefore restrict that person's ability to provide legal services under this rule.
- [8] The ABA National Lawyer Regulatory Data Bank is available to help determine whether any lawyer seeking to practice in this state pursuant to rule 31.17(2) or (3) is disbarred, suspended from practice or otherwise subject to a public disciplinary sanction that would restrict the lawyer's ability to practice law in any other jurisdiction.

 [Court Order May 14, 2007; February 14, 2008, effective April 1, 2008]

Rule 31.18 Licensing and practice of foreign legal consultants.

- **31.18(1)** *General regulation as to licensing.* In its discretion, the supreme court may license to practice in the State of Iowa as a foreign legal consultant, without examination, an applicant who:
- a. Is, and for at least five years has been, a member in good standing of a recognized legal profession in a foreign country, the members of which are admitted to practice as lawyers or counselors at law or the equivalent and are subject to effective regulation and discipline by a duly constituted professional body or a public authority;
- b. For at least five years preceding his or her application has been a member in good standing of such legal profession and has been lawfully engaged in the practice of law in the foreign country or elsewhere substantially involving or relating to the rendering of advice or the provision of legal services concerning the law of the foreign country;
- c. Possesses the good moral character and general fitness requisite for a member of the bar of this state; and
- d. Intends to practice as a foreign legal consultant in this state and to maintain an office in this state for that purpose.

31.18(2) Application and fee.

- a. The applicant shall file an application for a foreign legal consultant license with the National Conference of Bar Examiners through their online character and fitness application process at http://www.ncbex.org/ea, unless an exception is granted by the Office of Professional Regulation. The applicant shall pay the investigative fee required by the National Conference of Bar Examiners at the time of filing the application.
- b. In addition, the applicant shall file the following documents and fee with the Office of Professional Regulation:
- (1) A certificate from the professional body or public authority having final jurisdiction over professional discipline in the foreign country in which the applicant is admitted, certifying the applicant's admission to practice, date of admission, and good standing as a lawyer or counselor at law or the equivalent, and certifying that the applicant has not been disciplined and no charges of professional misconduct are pending, or identifying any disciplinary sanctions that have been imposed upon the applicant or any pending charges, complaints, or grievances;
- (2) A letter of recommendation from one of the members of the executive body of such professional body or public authority or from one of the judges of the highest law court or court of original jurisdiction in the foreign country in which the applicant is admitted;
- (3) Duly authenticated English translations of the certificate required by rule 31.18(2)(b)(1) and the letter required by rule 31.18(2)(b)(2) if they are not in English;
- (4) The requisite documentation establishing the applicant's compliance with the immigration laws of the United States;

- (5) Other evidence as the supreme court may require regarding the applicant's educational and professional qualifications, good moral character and general fitness, and compliance with the requirements of rule 31.18(1); and
- (6) An administrative fee of \$500 payable to the Office of Professional Regulation at the time the application is filed.
- **31.18(3)** Scope of practice. A person licensed to practice as a foreign legal consultant under this rule may render legal services in this state, but shall not be considered admitted to practice law here, or in any way hold himself or herself out as a member of the bar of this state, or do any of the following:
- a. Appear as a lawyer on behalf of another person in any court, or before any magistrate or other judicial officer, in this state (except when admitted pro hac vice pursuant to Iowa Ct. R. 31.14);
- b. Prepare any instrument effecting the transfer or registration of title to real estate located in the United States of America;
 - c. Prepare:
- (1) Any will or trust instrument effecting the disposition on death of any property located in the United States of America and owned by a resident thereof, or
- (2) Any instrument relating to the administration of a decedent's estate in the United States of America:
- d. Prepare any instrument in respect of the marital or parental relations, rights, or duties of a resident of the United States of America, or the custody or care of the children of such a resident;
- e. Render professional legal advice on the law of this state or of the United States of America (whether rendered incident to the preparation of legal instruments or otherwise);
- f. Carry on a practice under, or utilize in connection with such practice, any name, title, or designation other than one or more of the following:
 - (1) The foreign legal consultant's own name;
 - (2) The name of the law firm with which the foreign legal consultant is affiliated;
- (3) The foreign legal consultant's authorized title in the foreign country of his or her admission to practice, which may be used in conjunction with the name of that country; and
- (4) The title "foreign legal consultant," which may be used in conjunction with the words "admitted to the practice of law in [name of the foreign country of his or her admission to practice]."
- **31.18(4)** Rights and obligations. Subject to the limitations listed in rule 31.18(3), a person licensed under this rule shall be considered a foreign legal consultant affiliated with the bar of this state and shall be entitled and subject to:
- a. The rights and obligations set forth in the Iowa Rules of Professional Conduct or arising from the other conditions and requirements that apply to a member of the bar of this state under the Iowa Court Rules; and
 - b. The rights and obligations of a member of the bar of this state with respect to:
- (1) Affiliation in the same law firm with one or more members of the bar of this state, including by:
 - 1. Employing one or more members of the bar of this state;
- 2. Being employed by one or more members of the bar of this state or by any partnership [or professional corporation] that includes members of the bar of this state or that maintains an office in this state; and
- 3. Being a partner in any partnership [or shareholder in any professional corporation] that includes members of the bar of this state or that maintains an office in this state; and
 - (2) Attorney-client privilege, work-product privilege, and similar professional privileges.
- **31.18(5)** *Discipline.* A person licensed to practice as a foreign legal consultant under this rule shall be subject to professional discipline in the same manner and to the same extent as members of the bar of this state. To this end:
 - a. Every person licensed to practice as a foreign legal consultant under this rule:
- (1) Shall be subject to the jurisdiction of the supreme court and the Iowa Supreme Court Attorney Disciplinary Board and to reprimand, suspension, removal, or revocation of his or her license to practice by the supreme court and shall otherwise be governed by the Iowa Rules of Professional Conduct and the Iowa Court Rules; and
- (2) Shall execute and file with the clerk of the supreme court, in the form and manner as the court may prescribe:
- 1. A commitment to observe the Iowa Rules of Professional Conduct and the Iowa Court Rules to the extent applicable to the legal services authorized under rule 31.18(3);

- 2. A written undertaking to notify the court of any change in the foreign legal consultant's good standing as a member of the foreign legal profession referred to in rule 31.18(1)(a) and of any final action of the professional body or public authority referred to in rule 31.18(2)(b)(1) imposing any disciplinary reprimand, suspension, or other sanction upon the foreign legal consultant; and
- 3. A duly acknowledged instrument in writing, providing the foreign legal consultant's address in this state and designating the clerk of the supreme court as his or her agent for service of process. The foreign legal consultant shall keep the Office of Professional Regulation advised in writing of any changes of address in this jurisdiction. In any action or proceeding brought against the foreign legal consultant and arising out of or based upon any legal services rendered or offered to be rendered by the foreign legal consultant within this state or to residents of this state, service shall first be attempted upon the foreign legal consultant at the most recent address filed with the clerk. Whenever after due diligence service cannot be made upon the foreign legal consultant at that address, service may be made upon the clerk. Service made upon the clerk in accordance with this provision is effective as if service had been made personally upon the foreign legal consultant.
- b. Service of process on the clerk under rule 31.18(5)(a)(2)"3" shall be made by personally delivering to the clerk's office, and leaving with the clerk, or with a deputy or assistant authorized by the clerk to receive service, duplicate copies of the process. The clerk shall promptly send one copy of the process to the foreign legal consultant to whom the process is directed, by certified mail, return receipt requested, addressed to the foreign legal consultant at the most recent address provided in accordance with rule 31.18(5)(a)(2)"3."
- **31.18(6)** Required fees and annual statements. A person licensed as a foreign legal consultant shall pay a \$200 registration fee to the Client Security Commission. The person licensed under this rule shall file an annual statement and pay the annual disciplinary fee as required by Iowa Ct. Rs. 39.5 and 39.8.
- **31.18(7)** Revocation of license. If the supreme court determines that a person licensed as a foreign legal consultant under this rule no longer meets the requirements for licensure set forth in rule 31.18(1)(a) or (b), it shall revoke the foreign legal consultant's license.
- **31.18(8)** Admission to bar. If a person licensed as a foreign legal consultant under this rule is subsequently admitted as a member of the bar of this state under the rules governing admission, that person's foreign legal consultant license shall be deemed superseded by the license to practice law as a member of the bar of this state.

[Court Order June 3, 2009; January 19, 2010; August 21, 2013]

Rule 31.19 Certification and pro bono participation of emeritus attorneys.

31.19(1) *Purpose.* The following rule establishes the emeritus attorneys pro bono participation program.

31.19(2) *Definitions.*

- a. Emeritus attorney. An "emeritus attorney" is any person who is admitted to practice law in Iowa and is on inactive, active, or retired status at the time of application, or who is or was admitted to practice law before the highest court of any other state or territory of the United States or the District of Columbia, and:
 - (1) Does not have a pending disciplinary proceeding;
 - (2) Has never been disbarred or had a license to practice law revoked in any jurisdiction;
- (3) Agrees to abide by the Iowa Rules of Professional Conduct and submit to the jurisdiction of the Iowa Supreme Court, the Iowa Supreme Court Attorney Disciplinary Board, and the Iowa Supreme Court Grievance Commission for disciplinary purposes;
- (4) Neither requests nor accepts compensation of any kind for the legal services to be rendered under this chapter; and
 - (5) Is certified under this rule.
- b. Active. For purposes of this rule, "active" describes lawyers with the status of corporate, full-time, part-time, government, judge, or military service for purposes of the Client Security Commission.
- c. Approved legal aid organization. For purposes of this rule, an "approved legal aid organization" shall include a program sponsored by a bar association, law school, or a not-for-profit legal aid organization, approved by the Iowa Supreme Court, whose primary purpose is to provide legal representation to low-income persons in Iowa. A legal aid organization seeking approval from the court for the purposes of this rule shall file a petition with the Office of Professional Regulation certifying that it is a not-for-profit organization and reciting with specificity:

- (1) The structure of the organization and whether it accepts funds from its clients;
- (2) The major sources of funds the organization uses;
- (3) The criteria used to determine potential clients' eligibility for legal services the organization performs:
 - (4) The types of legal and nonlegal services the organization performs;
- (5) The names of all members of the Iowa bar the organization employs or who regularly perform legal work for the organization;
 - (6) The existence and extent of malpractice insurance that will cover the emeritus attorney;
 - (7) The number of attorneys on the organization's board of directors; and
 - (8) The availability of in-house continuing legal education.
 - **31.19(3)** *Activities.*
- a. Permissible activities. An emeritus attorney, in association with an approved legal aid organization, may perform the following activities:
- (1) The emeritus attorney may appear in any court or before any administrative tribunal in this state on behalf of a client of an approved legal aid organization.
- (2) The emeritus attorney may prepare pleadings and other documents to be filed in any court or before any administrative tribunal in this state in any matter in which the emeritus attorney is involved. Such pleadings shall include the attorney's status as emeritus attorney and the name of the approved legal aid organization, except as permitted by Iowa Rule of Civil Procedure 1.423.
- (3) The emeritus attorney may provide advice, screening, transactional, and other activities for clients of approved legal aid organizations.
- b. Determination of nature of participation. The presiding judge or hearing officer may, in the judge's or officer's discretion, determine the extent of the emeritus attorney's participation in any proceedings before the court.
 - **31.19(4)** Supervision and limitations.
- a. Supervision by attorney. An emeritus attorney must perform all activities authorized by this chapter under the general supervision of the approved legal aid organization.
- b. Representation of status. Attorneys permitted to perform services under this chapter may only hold themselves out as emeritus attorneys.
- c. Payment of expenses and award of fees. The prohibition against compensation for the emeritus attorney contained in rule 31.19(2)(a)(4) shall not prevent the approved legal aid organization from reimbursing the emeritus attorney for actual expenses incurred while rendering services under this chapter or from paying continuing legal education attendance fees on behalf of the emeritus attorneys, nor shall it prevent the approved legal aid organization from making such charges for its services as it may otherwise properly charge. The approved legal aid organization shall be entitled to receive all court-awarded attorneys' fees for any representation rendered by the emeritus attorney.
- **31.19(5)** *Certification.* Permission for an emeritus attorney to perform services under this chapter shall become effective upon filing with and approval by the Office of Professional Regulation of:
- a. A certification from an approved legal aid organization stating that the emeritus attorney is currently associated with that legal aid organization and that all activities of the emeritus attorney will be under the general supervision of the legal aid organization;
- b. A certificate from the highest court or agency in the state, territory, or district in which the emeritus attorney previously has been licensed to practice law, certifying that the emeritus attorney is in good standing, does not have a pending disciplinary proceeding, and has never been disbarred or had the license to practice law revoked; and
 - c. A sworn statement from the emeritus attorney that the emeritus attorney:
- (1) Relinquishes status as an inactive, active, or retired lawyer and requests placement in emeritus status for purposes of the Client Security Commission and Commission on Continuing Legal Education;
 - (2) Understands and will abide by the provisions of the Iowa Rules of Professional Conduct;
- (3) Submits to the jurisdiction of the Iowa Supreme Court, the Iowa Supreme Court Attorney Disciplinary Board, and the Iowa Supreme Court Grievance Commission for disciplinary purposes; and
- (4) Will neither request nor accept compensation of any kind for the legal services authorized under this chapter.
 - **31.19(6)** Withdrawal of certification.

- a. Withdrawal of permission to perform services. Permission to perform services under this chapter shall cease immediately upon the filing with the office of professional regulation of a notice either:
- (1) From the approved legal aid organization stating that the emeritus attorney has ceased to be associated with the organization, which notice must be filed within 30 days after such association has ceased; or
- (2) From the Iowa Supreme Court, in its discretion, at any time, stating that permission to perform services under this chapter has been revoked. A copy of such notice shall be mailed by the office of professional regulation to the emeritus attorney involved and to the approved legal aid organization.
- b. Notice of withdrawal. If an emeritus attorney's certification is withdrawn for any reason, the approved legal aid organization shall immediately file a notice of such action in the official file of each matter pending before any court or tribunal in which the emeritus attorney was involved.
- **31.19(7)** *Discipline.* In addition to any appropriate proceedings and discipline that may be imposed upon the emeritus attorney by the Iowa Supreme Court under the court's disciplinary rules, the Iowa Rules of Professional Conduct, or the Code of Iowa, the Iowa Supreme Court may, at any time, with or without cause, withdraw certification under this rule.
 - **31.19(8)** Fees and annual statements.
- a. Annual report to Client Security Commission. A lawyer certified under this rule shall file the annual questionnaire required by Iowa Ct. R. 39.11 and the annual statement required by Iowa Ct. R. 39.8(1), but shall be exempt from the annual disciplinary fee and fund assessment provided in Iowa Ct. Rs. 39.5 and 39.6.
- b. Annual Report to Commission on Continuing Legal Education. A lawyer certified under this rule shall fulfill the continuing legal education attendance, reporting, and fee payment requirements set forth in Iowa Ct. Rs. 41.3 and 41.4. However, a lawyer shall not be required to comply with the continuing legal education requirements set forth in Iowa Ct. R. 41.3 for the calendar year in which the lawyer is first certified under this rule. The approved legal aid organization may pay the continuing legal education reporting fee on behalf of the emeritus attorney.

 [Court Order March 1, 2013]

Rules 31.20 to **31.24** Reserved.

Rule 31.25 Forms.
Rule 31.25 — Form 1: Application for Admission Pro Hac Vice — District Court.

| IN THE IOWA DISTRICT COURT OF _ | COUNTY |
|--|--|
| | Case No |
| Plaintiff(s), | APPLICATION FOR ADMISSION PRO HAC VICE |
| vs. | (Iowa Court Rule 31.14) |
| | , |
| Defendant(s). | |
| The undersigned seeks permission to appear pro hac vice i | n the above-captioned proceeding. |
| Applicant shall complete all of the following: | |
| If this matter involves review of an agency action did the below? | applicant seek admission pro hac vice in the proceedings |
| Yes No | |
| f yes, attach copies of all related documents. | |
| Applicant's full name, residential address, and business. | ess address. |
| | |
| b. The name, address, and phone number of each client | sought to be represented. |
| respective period of licensure. | licensed to practice as a foreign legal consultant and the |
| | |
| d. Has the applicant ever been denied admission pro have Γ Yes Γ No Γ | c vice in this state? |
| If yes, on a separate page specify the caption of the proceed Attach copies of all related documents. | dings, the date of the denial, and what findings were made. |
| e. Has the applicant ever had admission pro hac vice re Yes \square No \square | voked in this state? |
| If yes, on a separate page specify the caption of the proceed made. Attach copies of all related documents. | edings, the date of the revocation, and what findings were |
| ion? | jurisdiction for reasons other than failure of a bar examina- |
| Yes No | |
| If yes, on a separate page specify the jurisdiction, caption of were made. Attach copies of all related documents. | of the proceedings, the date of the denial, and what findings |
| g. Has the applicant ever been formally disciplined or s Yes \square No \square | anctioned by any court in this state? |
| | ns, the name of the authority bringing such proceedings, the were made, and what action was taken in connection with |

caption of the proceedings, the date filed, what findings we those proceedings. Attach copies of all related documents.

| Signature of person making service | |
|---|----------|
| The undersigned certifies a copy of this application was served on the following parties (list names and addresses below) on the day of 20 by personal deliver deposit in the U.S. mail. | e- (y |
| CERTIFICATE OF SERVICE | |
| Date Signature of applicant | _ |
| I certify under penalty of perjury and pursuant to the laws of the state of Iowa that the preceding is true and correct. | |
| q. On a separate page the applicant shall provide any other information the applicant deems necessary to support that application for admission pro hac vice. | ıe |
| p. If the applicant has appeared pro hac vice in this state in five proceedings within the preceding two years, the applicant shall, on a separate page, provide a statement showing good cause why the applicant should be admitted in the present proceeding. | |
| I acknowledge that service upon the in-state lawyer in all matters connected with the proceedings will have the same effect as if personally made upon me. Yes \(\subseteq \) No \(\subseteq \) | - ie |
| n. List the name, address, telephone number, and personal identification number of an in-state lawyer in good standing of the bar of this state who will sponsor the applicant's pro hac vice request. | rd - |
| I acknowledge my familiarity with the rules of professional conduct, the disciplinary procedures of this state, the statedards for professional conduct, the applicable local rules, and the procedures of the court before which I seek to practice. Yes \(\subseteq \) No \(\subseteq \) | |
| If yes, on a separate page list the name and address of each court or agency and a full identification of each proceeding which an application was filed, including the date and outcome of the application. Attach copies of all related document | |
| l. Has the applicant filed an application to appear pro hac vice in this state within the preceding two years? Yes □ No □ | |
| If yes, on a separate page specify the nature of the allegations, the name of the court before which such proceedings were conducted, the date of the contempt order or sanction, the caption of the proceedings, and the substance of the court's ruings. Attach to this application a copy of the written order or a transcript of the oral rulings and other related documents | 1- |
| k. Has the applicant ever been held formally in contempt or otherwise sanctioned by any court in a written order in the last five years for disobedience to its rules or orders? Yes \(\subseteq \) No \(\subseteq \) | in |
| If yes, on a separate page specify the jurisdiction, caption of the proceedings, the terms of the probation, and while findings were made. Attach copies of all related documents. | at |
| Has the applicant ever been placed on probation by a disciplinary authority in any other jurisdiction? Yes \(\subseteq \) No \(\subseteq \) | |
| If yes, on a separate page specify as to each such proceeding: the nature of the allegations, the name of the person of authority bringing such proceedings, the date the proceedings were initiated and finally concluded, the style of the proceedings, and the findings made and actions taken in connection with those proceedings. Attach copies of all related documents. | ıe |
| i. Has any formal, written disciplinary proceeding ever been brought against the applicant by a disciplinary authority or unauthorized practice of law commission in any other jurisdiction within the last five years? Yes \(\subseteq \) No \(\subseteq \) | r- |
| If yes, on a separate page specify the nature of the allegations, the name of the authority bringing such proceedings, the caption of the proceedings, the date filed, what findings were made, and what action was taken in connection with those proceedings. Attach copies of all related documents. | |
| Has the applicant ever been the subject of any injunction, cease-and-desist letter, or other action arising from finding that the applicant engaged in the unauthorized practice of law in this state or elsewhere? Yes \(\subseteq \) No \(\subseteq \) | a |

Rule 31.25 — Form 2: Application for Admission Pro Hac Vice — Supreme Court.

IN THE IOWA SUPREME COURT

| | Case No. |
|---|---|
| , | APPLICATION FOR ADMISSION PRO |
| Plaintiff(s), | HAC VICE |
| vs. | (Iowa Court Rule 31.14) |
| Defendant(s). | |
| The undersigned seeks permission to appear pro hac vice i | in the above-captioned proceeding. |
| Applicant shall complete all of the following: | |
| Did the applicant seek admission pro hac vice in the proce | edings below? |
| Yes 🗌 No 🗌 | |
| If yes, attach copies of all related documents. | |
| a. Applicant's full name, residential address, and busing | ess address. |
| | |
| b. The name, address, and phone number of each client | sought to be represented. |
| c. The courts before which the applicant has been admi any jurisdiction in which the out-of-state lawyer has beer respective period of licensure. | tted to practice and the respective periods of admission and a licensed to practice as a foreign legal consultant and the |
| d. Has the applicant ever been denied admission pro ha Yes □ No □ | c vice in this state? |
| If yes, on a separate page specify the caption of the procee Attach copies of all related documents. | dings, the date of the denial, and what findings were made |
| e. Has the applicant ever had admission pro hac vice re Yes □ No □ | voked in this state? |
| If yes, on a separate page specify the caption of the proce made. Attach copies of all related documents. | edings, the date of the revocation, and what findings were |
| tion? | jurisdiction for reasons other than failure of a bar examina- |
| Yes No | |
| If yes, on a separate page specify the jurisdiction, caption of were made. Attach copies of all related documents. | of the proceedings, the date of the denial, and what findings |
| g. Has the applicant ever been formally disciplined or s Yes \square No \square | sanctioned by any court in this state? |
| | |

If yes, on a separate page specify the nature of the allegations, the name of the authority bringing such proceedings, the caption of the proceedings, the date filed, what findings were made, and what action was taken in connection with those proceedings. Attach copies of all related documents.

| h. Has the applicant ever been the subject of any injunction, cease-and-desist letter, or other action arising from a finding that the applicant engaged in the unauthorized practice of law in this state or elsewhere? Yes \(\subseteq \) No \(\subseteq \) |
|---|
| If yes, on a separate page specify the nature of the allegations, the name of the authority bringing such proceedings, the caption of the proceedings, the date filed, what findings were made, and what action was taken in connection with those proceedings. Attach copies of all related documents. |
| i. Has any formal, written disciplinary proceeding ever been brought against the applicant by a disciplinary authority or unauthorized practice of law commission in any other jurisdiction within the last five years? Yes \(\subseteq\) No \(\subseteq\) |
| If yes, on a separate page specify as to each such proceeding: the nature of the allegations, the name of the person or authority bringing such proceedings, the date the proceedings were initiated and finally concluded, the style of the proceedings, and the findings made and actions taken in connection with those proceedings. Attach copies of all related documents. |
| Has the applicant ever been placed on probation by a disciplinary authority in any other jurisdiction? Yes \(\subseteq \) No \(\subseteq \) |
| If yes, on a separate page specify the jurisdiction, caption of the proceedings, the terms of the probation, and what findings were made. Attach copies of all related documents. |
| Has the applicant ever been held formally in contempt or otherwise sanctioned by any court in a written order in the last five years for disobedience to its rules or orders? Yes \(\subseteq \) No \(\subseteq \) |
| If yes, on a separate page specify the nature of the allegations, the name of the court before which such proceedings were conducted, the date of the contempt order or sanction, the caption of the proceedings, and the substance of the court's rulings. Attach to this application a copy of the written order or a transcript of the oral rulings and other related documents. |
| I. Has the applicant filed an application to appear pro hac vice in this state within the preceding two years? Yes \(\subseteq \) No \(\subseteq \) |
| If yes, on a separate page list the name and address of each court or agency and a full identification of each proceeding in which an application was filed, including the date and outcome of the application. Attach copies of all related documents. |
| I acknowledge my familiarity with the rules of professional conduct, the disciplinary procedures of this state, the standards for professional conduct, the applicable local rules, and the procedures of the court before which I seek to practice. Yes \(\subseteq \ No \subseteq \) |
| n. List the name, address, telephone number, and personal identification number of an in-state lawyer in good standing of the bar of this state who will sponsor the applicant's pro hac vice request. |
| I acknowledge that service upon the in-state lawyer in all matters connected with the proceedings will have the same effect as if personally made upon me. Yes \(\subseteq \) No \(\subseteq \) |
| p. If the applicant has appeared pro hac vice in this state in five proceedings within the preceding two years, the applicant shall, on a separate page, provide a statement showing good cause why the applicant should be admitted in the present proceeding. |
| q. On a separate page the applicant shall provide any other information the applicant deems necessary to support the application for admission pro hac vice. |
| I certify under penalty of perjury and pursuant to the laws of the state of Iowa that the preceding is true and correct. |
| Date Signature of applicant |
| CERTIFICATE OF SERVICE |
| The undersigned certifies a copy of this application was served on the following parties (list names and addresses below) on the day of 20 by personal delivery deposit in the U.S. mail. |
| Signature of nerson molting complex |

Rule 31.25 — Form 3: Registration statement for lawyer engaging in temporary practice following determination of major disaster.

IN THE IOWA SUPREME COURT

| REGISTRATION STATEMENT FOR LAWYER ENGAGING IN TEMPORARY PRACTICE FOLLOWING DETERMINATION OF MAJOR DISASTER | IOWA COURT RULE 31.17 | | |
|---|----------------------------|--|--|
| Pursuant to Iowa Court Rule 31.17(6) the undersigned shal | ll complete the following: | | |
| 1. Name | | | |
| Lawyer's full name. | | | |
| Name of lawyer's firm. | | | |
| 2. Home State Information | | | |
| Residential address in lawyer's home state. | | | |
| | | | |
| Business address in lawyer's home state. | | | |
| | | | |
| Telephone number(s) in lawyer's home state. | | | |
| | | | |
| E-mail address. | | | |
| | | | |
| 3. Iowa Information | | | |
| Residential address in Iowa. | | | |
| | | | |
| Business address in Iowa. | | | |
| | | | |

| Telephone number(s) in Iowa. |
|---|
| E-mail address. |
| 4. Bar Admission |
| List the courts before which you have been admitted to practice, the respective periods of admission, and your registra tion or bar numbers. |
| |
| Is your license to practice currently subject to disbarment, suspension, or restrictions in any jurisdiction? |
| Yes \(\sum \) No \(\sup \) |
| If yes, on a separate page specify the proceedings and attach copies of all related documents. |
| 5. Temporary Practice Following Determination of Major Disaster |
| (Check all that apply) |
| Specify whether you will engage in temporary practice pursuant to: |
| ☐ Iowa Court Rule 31.17(2) (pro bono legal services). ☐ Iowa Court Rule 31.17(3) (legal services reasonably related to lawyer's practice of law in the other jurisdiction or area of such other jurisdiction, where the disaster occurred). |
| I agree that I am subject to the disciplinary procedures and authority of this court and the Iowa Rules of Professional Conduct, the Standards for Professional Conduct, and any applicable local rules and procedures. |
| Yes No |
| ATTORNEY CERTIFICATION |
| I certify under penalty of perjury and pursuant to the laws of the state of Iowa that the preceding is true and correct |
| I certify under penalty of perjury and pursuant to the laws of the state of Iowa that I am licensed and in good standing and authorized to practice law in each jurisdiction listed above and my license is not subject to suspension or restriction in any jurisdiction. |
| Date Signature of Lawyer |
| |

[Court Order May 14, 2007]

CHAPTER 39 CLIENT SECURITY COMMISSION

| Rule 39.1 | Client Security Commission |
|------------|--|
| Rule 39.2 | Principal executive officer |
| Rule 39.3 | Clients' security trust fund of the bar of Iowa |
| Rule 39.4 | Audit — treasurer's duties — budget |
| Rule 39.5 | Annual disciplinary fee |
| Rule 39.6 | Fund assessments |
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| Rule 39.8 | Enforcement |
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| Rule 39.11 | Annual questionnaire |
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| Rule 39.13 | Attorneys acting as fiduciaries |
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| Rule 39.16 | Attorneys Practicing in Iowa Under the Multijurisdictional Practice Rule |

CHAPTER 39 CLIENT SECURITY COMMISSION

Rule 39.1 Client Security Commission.

- **39.1(1)** *Commission.* There is hereby created a Client Security Commission, hereinafter referred to as "commission," which shall have the duties and powers provided in this chapter.
- **39.1(2)** *Duties of commission.* The commission shall have the following duties and powers as limited and defined in this chapter:
- a. To examine lawyer defalcations and breaches of Iowa Rules of Professional Conduct, the rules relating to the discipline of members of the Iowa bar, and to make recommendations to the supreme court concerning rule changes deemed necessary or desirable in this area.
- b. To assist the court in administering both preventive and remedial attorney disciplinary procedures contained in these rules or other court rules.
- c. To administer and operate the Clients' Security Trust Fund of the Bar of Iowa, as hereinafter created, designated as the "fund."
- **39.1(3)** Appointment of commissioners. The supreme court shall appoint five members of the Iowa bar and two laypersons who are residents of this state to the commission. The original appointment shall be two commissioners for a one-year term, two for a two-year term, one for a three-year term, one for a four-year term and one for a five-year term. At the expiration of such terms, all subsequent appointments shall be for a term of four years, and any commissioner who has served two full terms shall not be eligible for reappointment. A vacancy occurring during a term shall be filled by the supreme court for the unexpired portion thereof.
- **39.1(4)** Organization and meetings. The commissioners shall organize annually and shall then elect from among their number a chair and a treasurer to serve for a one-year term and such other officers for such terms as they deem necessary or appropriate. Meetings thereafter shall be held at the call of the chair or of the majority of the commissioners. Five commissioners shall constitute a quorum and may transact all business except as may be otherwise provided by this chapter and chapter 40 of the Iowa Court Rules.
- **39.1(5)** *Regulations.* The commission shall adopt regulations, consistent with this chapter and subject to the approval of the supreme court, concerning all of the powers and duties granted to and imposed upon the commission by this chapter.
- **39.1(6)** *Reimbursement.* The commissioners shall serve without compensation but shall be entitled to reimbursement from the fund for their expenses reasonably incurred in the performance of their duties.

[Court Order December 5, 1973; December 15, 1994, effective January 3, 1995; November 9, 2001, effective February 15, 2002; May 25, 2004; April 20, 2005, and July 1, 2005, effective July 1, 2005]

Rule 39.2 Principal executive officer.

- **39.2(1)** Appointment. The director of the office of professional regulation shall serve as the principal executive officer of the client security commission. Wherever in this chapter a reference to the "director" appears, it shall refer to the director of the office of professional regulation. The director shall file a bond annually with the commission with such surety as may be approved by it and in such amount as it may fix. Premiums on said bond shall be paid by the fund.
- **39.2(2)** *Duties of director.* Subject to the supervision of the supreme court and the commission, the director shall do the following:
- a. Collect attorney fees and assessments for the fund and report to the commission the names and addresses of all attorneys who fail to pay the fee and assessment.
- b. Serve as executive secretary to the commission and assist in the operation and administration of the fund.
- c. Conduct investigations and audits of attorneys' accounts and office procedures to determine compliance with this chapter, Iowa Rule of Professional Conduct 32:1.15, and chapter 45 of the Iowa Court Rules and report violations to the commission.
- d. Maintain an office in such place as the supreme court shall designate, act as a liaison between the court, the commission, and other commissions, committees, boards, and personnel serving a function in the disciplinary system, and maintain for the court records of disciplinary proceedings and such other information and data as the court shall require.

- e. Upon request of the commission, institute disciplinary proceedings before the grievance commission pursuant to chapter 35 of the Iowa Court Rules.
- f. Perform such other functions and duties as may be directed by the supreme court. [Court Order December 5, 1973; December 15, 1994, effective January 3, 1995; November 9, 2001, effective February 15, 2002; April 20, 2005, effective July 1, 2005; December 5, 2007]

Rule 39.3 Clients' security trust fund of the bar of Iowa.

- **39.3(1)** *Creation, operation and purpose.* A trust fund, to be known as the "Clients' Security Trust Fund of the Bar of Iowa" (hereinafter, the "fund") is hereby authorized and created.
- **39.3(2)** *Administration*. The fund shall be operated and administered by the commission in accordance with this chapter.
- **39.3(3)** *Purpose.* The purpose of the fund shall be to prevent defalcations by members of the Iowa bar, and insofar as practicable, to provide for the indemnification by the profession for losses caused to the public by the dishonest conduct of members of the bar of this state, and to provide funding for the administration of the lawyer disciplinary system and other programs which impact the disciplinary system including, but not limited to, the Iowa Lawyer's Assistance Program.
- **39.3(4)** *Powers and duties of commission relating to the fund.* The commission, in addition to the powers granted elsewhere in this chapter, shall have the following powers and duties:
- a. To receive, hold, manage, and distribute, pursuant to the direction of the supreme court and this chapter, the moneys raised hereunder, and any other amounts that may be received by the fund through voluntary contributions or otherwise.
- b. To adopt, subject to the approval of the supreme court, regulations for the administration of the fund and the procedures for presentation, consideration, recognition, rejection and payment of claims, and for conducting business. A copy of such regulations shall be filed with the clerk of the supreme court.
 - c. To enforce claims for restitution, arising by subrogation or assignment or otherwise.
- d. To invest the fund, or any portion thereof, in those investments and in the percentages authorized by Iowa Code section 97B.7, (investments for Iowa public employees' retirement system); provided, however, the commission shall not be required to invest such portions of the fund as it may deem necessary to be currently available for payment of claims and other expenses required by this chapter. All interest or other income received in the operation of the fund shall become a part of the fund.
 - e. To employ and compensate consultants, agents, legal counsel and employees.
- f. To delegate the power to perform routine acts which may be necessary or desirable for the operation of the fund, including the power to authorize disbursements for routine operating expenses of the fund, and all necessary expenses of the assistant administrator and staff in the performance of their duties; but authorization for payment of claims shall be made only by the commission under the provisions of this chapter.
 - g. To sue in the name of the commission without joining any or all individual commissioners.
- h. To purchase complementary fidelity coverage for the fund in such amount and with such limitations or deductible limits as in its discretion it determines proper.
- i. To pay reasonable and necessary attorney fees incurred by the commissioners of the supreme court in implementing chapter 35 of the Iowa Court Rules in disciplinary proceedings based on attorney defalcations or which are initiated pursuant to rule 39.2(3)(e).
- *j.* To fund programs which the commission believes will assist in preventing defalcations by attorneys. The annual allocation for any such program shall not exceed two and one-half percent of the fund value as of the beginning of the fiscal year in which the funding is to occur. No such funding may be provided unless there is at least twice the minimum balance required by rule 39.6(3) in the fund at the beginning of the fiscal year in which the funding is to occur.
- **39.3(5)** Applications to the supreme court. The commission may apply to the supreme court for interpretations of this chapter and of the extent of the commission's powers thereunder and for advice regarding the proper administration of the fund. Interpretations of the supreme court shall be obligatory when rendered.

[Court Order November 9, 2001, effective February 15, 2002; November 26, 2013, effective December 1, 2013]

Rule 39.4 Audit — treasurer's duties — budget.

39.4(1) Audit and report. On March 1 of each year, and at such additional times as the supreme court may order, the commission shall file with the supreme court a written report reviewing in detail

the administration of the fund during the preceding calendar year together with an audit of the fund certified by a certified public accountant licensed to practice in Iowa.

39.4(2) *Treasurer's duties.* The treasurer elected by the commission shall maintain the assets of the fund in a separate account and shall disburse moneys from the fund only at the direction of the supreme court or upon the action of the commission pursuant to this chapter. The treasurer shall file a bond annually with the commission with such surety as may be approved by it and in such amount as it may fix. Premiums on said bond shall be paid by the fund. A separate bookkeeping account designated as the disciplinary fund account shall be maintained within the fund for moneys derived from the annual disciplinary fee set out in rule 39.5. Fees, penalties, or investment income derived from the investment of the income from annual disciplinary fees and penalties shall be placed in the disciplinary fund account.

39.4(3) *Budget.* At least 60 days prior to the commencement of each fiscal year, the commission shall submit to the supreme court its budget of operations of such year, which may be amended thereafter as necessity dictates.

[Court Order November 9, 2001, effective February 15, 2002; December 5, 2007]

Rule 39.5 Annual disciplinary fee. As a condition to continuing membership in the bar of the supreme court, including the right to practice law before Iowa courts, every bar member, unless exempted, shall pay to the commission through the office of professional regulation an annual fee as determined by the supreme court to finance the disciplinary system. The annual fee shall be due on or before March 10 of each year, for that calendar year. A calendar year is defined as the period of time from January 1 through December 31. Members of the bar of the supreme court who certify in writing to the commission that they are a justice, judge, associate judge, or full-time magistrate of any court, spend full time in the military service of the United States following admission to the Iowa bar, are admitted on examination to the bar of Iowa during the current calendar year, or are issued a certificate of exemption pursuant to the provisions of rule 39.7 shall be exempt from payment of this fee

[Court Order November 9, 2001, effective February 15, 2002; December 5, 2007; December 2, 2011; April 25, 2014]

Rule 39.6 Fund assessments.

39.6(1) Assessments. As a condition to continuing membership in the bar of Iowa, including the right to practice law before Iowa courts, every bar member, unless exempted under the provisions of rule 39.6(6) or rule 39.7, shall pay to the commission through the office of professional regulation the assessment specified in rule 39.6(2), 39.6(3), or 39.6(4), or as provided by court order. The assessment shall be paid annually and deposited in the fund created pursuant to the provisions of rule 39.3. Assessments shall be due on or before March 10 of each year, for that calendar year. A calendar year is defined as the period of time from January 1 through December 31.

39.6(2) *Initial and regular assessment schedule.*

For the years after an initial total of \$200 in assessments has been paid, unless a special assessment is payable under rule 39.6(4), a regular annual assessment of \$50 annually. [Court Order June 13, 1979; November 13, 1984; November 15, 1985; November 11, 1986; November 19, 1987; October 20, 1988; November 16, 1989; December 15, 1994, effective January 3, 1995; November 9, 2001, effective February 15, 2002; December 5, 2007; November 26, 2013, effective December 26, 2013]

39.6(3) Certificate of sufficiency. The commission shall determine the net value of the cash and securities in the fund as of December 1 of each year. The commission shall file with the supreme court prior to December 31 of each year a certificate regarding sufficiency of the fund. Whenever the value of such assets shall equal less than \$900,000, after deducting all claims and requests for reimbursement against the fund, not disposed of at the date of valuation, and all expenses properly chargeable against the fund, a special assessment as set forth in rule 39.6(4) shall be payable for the next calendar year after the date of the certificate of sufficiency. This special assessment shall be paid in lieu of the regular assessment set in rule 39.6(2), by each member of the bar who has already paid

the \$200 initial assessment.

Comment: The November 26, 2013, amendment to new rule 39.6(3), raising the threshold used to calculate the sufficiency of the fund, is effective for the sufficiency calculation to be performed beginning December 1, 2013.

39.6(4) *Special assessment.* For any calendar year in which a special assessment is payable in lieu of the regular assessment set in rule 39.6(2), the special assessment is established as follows:

- a. Lawyers in full-time private practice. Members of the bar of Iowa in full-time private practice shall pay to the commission a special assessment of \$140.
- b. Lawyers in part-time private practice. Members of the bar of Iowa who derive net income of less than \$10,000 from the practice of law in Iowa during the preceding calendar year shall pay to the commission a special assessment of \$70. Net income from the practice of law shall be for the purposes of this rule that amount shown on the federal income tax return of such members for the appropriate year as "profit or loss from a business or profession." The commission may require members so electing to submit to the commission a copy of their federal income tax return for the appropriate year to substantiate the amount due hereunder.
- c. Judges, government attorneys, corporate counsel. Any member of the bar of Iowa who certifies in writing to the commission that the member is a justice, judge, associate judge, or full-time magistrate of any court, or one who performs legal services only for a governmental unit, or one who performs legal services only for a particular person, firm, or corporation (other than a professional legal corporation or a law firm) and stands in the legal capacity with such person, firm, or corporation as an employee, shall pay to the commission a special assessment of \$70. However, a retired judge or justice recalled for temporary service shall not be required to pay an assessment or surrender their certificate of exemption.
- **39.6(5)** *Multijurisdictional practitioners.* Lawyers practicing in Iowa under the provisions of rule of professional conduct 32:5.5(d)(2) and rule 39.16 shall pay the same initial, regular, and special assessments as members of the bar of Iowa in private practice.
- **39.6(6)** *Members in full-time military service.* Any member of the bar of Iowa who certifies in writing that the member is serving full-time in the military service of the United States shall be exempt from any assessment under this rule.

[Court Order November 9, 2001, effective February 15, 2002; December 5, 2007; November 26, 2013, effective December 26, 2013; April 25, 2014]

Rule 39.7 Certificate of exemption — required statement. A member of the bar of the supreme court who is not engaged in the practice of law in the state of Iowa may be granted a certificate of exemption by the commission, and thereafter no fee or assessment shall be required from such member unless the member thereafter engages in the practice of law in the state of Iowa, in which case the certificate of exemption shall without further order of court stand revoked and the member shall file at once the statement required by rule 39.8(1), and the questionnaire required by rule 39.11 and pay the fee and assessment due under rules 39.5 and 39.6. A member of the bar requesting a certificate of exemption shall file with the director the statement required by rule 39.8(1), and such part of the rule 39.11 questionnaire as the director may deem necessary to determine the member's status. The practice of law as that term is employed in this chapter includes the examination of abstracts, consummation of real estate transactions, preparation of legal briefs, deeds, buy and sell agreements, contracts, wills, and tax returns as well as the representation of others in any Iowa courts, the right to represent others in any Iowa courts, or to regularly prepare legal instruments, secure legal rights, advise others as to their legal rights or the effect of contemplated actions upon their legal rights, or to hold oneself out to so do; or to be one who instructs others in legal rights; or to be a judge or one who rules upon the legal rights of others unless neither the state nor federal law requires the person so judging or ruling to hold a license to practice law.

[Court Order November 9, 2001, effective February 15, 2002; December 5, 2007]

Rule 39.8 Enforcement.

39.8(1) To facilitate the collection of the annual fee and assessment provided for in rules 39.5 and 39.6, all members of the Iowa bar required to pay the fee and assessment, and those exempted other than by rule 39.7, shall, on or before March 10 of each year, file a statement, on a form prescribed by the director, setting forth their date of admission to practice before the supreme court, their current residence and office addresses, and such other information as the director may from time to time direct. In addition to such statement, every bar member shall file a supplemental statement of any change in

the information previously submitted within 30 days of such change. All persons admitted to practice before the supreme court shall file the statement required by this rule at the time of admission but no annual fee or assessment shall be payable until the time above provided. All attorneys failing to file the required statement by March 10 of each year shall, in addition to the annual fee and assessment provided for above, pay a penalty as set forth in the following schedule if the statement is filed after March 10. The penalty fees collected shall be used to pay the costs of administering the fund, or for such other purposes within the office of professional regulation as the supreme court may direct.

Penalty Schedule:

| If Filed: | Penalty: |
|------------------------------------|----------|
| After March 10 but before April 12 | \$100 |
| After April 11 but before May 12 | \$150 |
| After May 11 | \$200 |

39.8(2) Attorneys who fail to timely pay the fee and assessment required under rules 39.5 and 39.6, or fail to file the statement or supplement thereto provided in rule 39.8(1), may have their right to practice law suspended by the supreme court, provided that at least 15 days prior to such suspension, a notice of delinquency has been served upon them in the manner provided for the service of original notices in Iowa R. Civ. P. 1.305, or has been forwarded to them by restricted certified mail, return receipt requested, addressed to them at their last-known address. Such attorneys shall be given the opportunity during said 15 days to file in duplicate in the office of professional regulation an affidavit disclosing facts demonstrating the noncompliance was not willful and tendering such documents and sums and penalties which, if accepted, would cure the delinquency, or to file in duplicate in the office of the clerk of the supreme court a request for hearing to show cause why their license to practice law should not be suspended. A hearing shall be granted if requested. If, after hearing, or failure to cure the delinquency by satisfactory affidavit and compliance, an attorney is suspended, the attorney shall be notified thereof by either of the two methods above provided for notice of delinquency.

- **39.8(3)** Any attorney suspended pursuant to this chapter shall do all of the following:
- a. Within 15 days in the absence of co-counsel, notify clients in all pending matters to seek legal advice elsewhere, calling attention to any urgency in seeking the substitution of another lawyer.
- b. Within 15 days deliver to all clients being represented in pending matters any papers or other property to which they are entitled or notify them and any co-counsel of a suitable time and place where the papers and other property may be obtained, calling attention to any urgency for obtaining the papers or other property.
 - c. Within 30 days refund any part of any fees paid in advance that have not been earned.
- d. Within 15 days notify opposing counsel in pending litigation or, in the absence of such counsel, the adverse parties, of the suspension and consequent disqualification to act as a lawyer after the effective date of such discipline.
- e. Within 15 days file with the court, agency, or tribunal before which the litigation is pending a copy of the notice to opposing counsel or adverse parties.
 - f. Keep and maintain records of the steps taken to accomplish the foregoing.
- g. Within 30 days file proof with the supreme court and with the Iowa Supreme Court Attorney Disciplinary Board of complete performance of the foregoing, and this shall be a condition for application for readmission to practice.
- **39.8(4)** Any attorney suspended pursuant to this chapter shall refrain, during such suspension, from all facets of the ordinary law practice including, but not limited to, the examination of abstracts; consummation of real estate transactions; preparation of legal briefs, deeds, buy and sell agreements, contracts, wills, and tax returns; and acting as a fiduciary. Such suspended attorney may, however, act as a fiduciary for the estate, including a conservatorship or guardianship, of any person related to the suspended attorney within the second degree of affinity or consanguinity.
- 39.8(5) Attorneys who have been suspended pursuant to this chapter or who currently hold a certificate of exemption and who practice law or who hold themselves out as being authorized to practice law in this state are engaged in the unauthorized practice of law and may also be held in

contempt of the court or may be subject to disciplinary action as provided by chapter 35 of the Iowa Court Rules.

[Court Order November 9, 2001, effective February 15, 2002; April 20, 2005, effective July 1, 2005; December 5, 2007; April 25, 2008; June 5, 2008, effective July 1, 2008; January 19, 2010; April 25, 2014]

Rule 39.9 Claims.

- **39.9(1)** The commission shall consider for payment all claims resulting from the dishonest conduct of a member of the bar of this state acting either as an attorney or fiduciary, provided that all of the following are established:
- a. Said conduct was engaged in while the attorney was a practicing member of the bar of this state and the claim arises out of the practice of law in this state. The commission shall not consider any claim resulting from conduct engaged in after an attorney's license to practice in Iowa has been revoked. For purposes of this rule, a practicing member of the bar of this state is:
- (1) A member of the bar of Iowa whose license is active and in good standing at the time of the dishonest conduct giving rise to the claim, or
- (2) A member of the bar of Iowa whose license has been suspended and whom the client reasonably believes to be licensed, active, and in good standing at the time of the dishonest conduct giving rise to the claim. If the attorney has been suspended more than six months prior to the time of the dishonest conduct giving rise to the claim, it shall be presumed that the client was unreasonable in believing that the attorney was licensed, active, and in good standing at the time of the dishonest conduct.
- (3) An attorney who establishes an office or other systematic and continuous presence in Iowa for the practice of law under the provisions of rule of professional conduct 32:5.5(d)(2) and pays the annual fee and assessment due under rules 39.5 and 39.6.
 - b. Such defalcation or dishonest conduct occurred after January 1, 1974.
- c. The claim is made within one year after the client's discovery of the loss; provided, however, such time limitation in unusual circumstances may be extended by the commission in its discretion for good cause shown.
- d. The claim is made directly by or on behalf of the injured client or the client's personal representative or, if a corporation, by or on behalf of itself or its successors in interest.
- e. The commission is satisfied that there is no other source or collateral source for the reimbursement of the loss.
- f. Claims shall not be paid which arise out of an employer-employee relationship as distinguished from a lawyer-client relationship or a fiduciary relationship.
- **39.9(2)** The commission is invested with the power, which it shall exercise in its sole discretion, to determine whether a claim merits reimbursement from the fund, and if so, the amount of such reimbursement, the time, place and manner of its payment, the conditions upon which payment shall be made, and the order in which payment shall be made. The commission's powers in this respect may be exercised only by the affirmative vote of at least four commissioners. In making such determinations, the commission shall consider among other appropriate factors, the following:
- a. The amounts available and likely to become available to the fund for the payment of claims and the size and number of claims which are likely to be presented.
- b. The total amount of reimbursable losses in previous years for which total reimbursement has not been made, if any, and the total assets of the fund.
- c. The amount of the claimant's loss as compared to the amount of losses sustained by other eligible claimants.
 - d. The degree of hardship suffered by the claimant as a result of the loss.
 - e. The degree of negligence, if any, of the claimant which may have contributed to the loss.
- f. The total amount of losses caused by defalcations of any one attorney or associated group of attorneys.
- **39.9(3)** The commission shall, by regulation approved by the supreme court, fix the maximum amount which any one claimant may recover from the fund and the aggregate maximum amount which may be recovered because of the dishonest conduct of any one attorney.
- **39.9(4)** No claimant or any other person or organization shall have any right in the fund as third-party beneficiary or otherwise. Reimbursement by claim on the fund shall be a matter of grace and not of right.
- **39.9(5)** The commission may require as a condition to payment that the claimant execute an assignment of claimant's right against the defaulting lawyer.

- **39.9(6)** No claimant need be represented by counsel before the commission. No attorney representing a claimant shall receive a fee for services from the fund. Any agreement for compensation between a claimant and any attorney retained for prosecution of the claim shall be subject to the approval of the commission.
- **39.9(7)** The commission may request individual lawyers, bar associations, and other organizations of lawyers to assist the commission in the investigation of claims.
- **39.9(8)** The payment or denial of any claim filed under the provisions of this rule shall be inadmissible as evidence in any disciplinary or contempt proceeding.

[Court Order December 5, 1973; April 22, 1974; October 16, 1974; April 9, 1975; April 10, 1975; August 29, 1975; October 28, 1976; November 21, 1977; January 15, 1979; June 20, 1980; April 21, 1982; November 13, 1984; April 25, 1985; February 16, 1990, effective March 15, 1990; December 15, 1994, effective January 3, 1995; March 6, 1995; January 24, 2000; November 9, 2001, effective February 15, 2002; February 20, 2012; December 10, 2012]

Rule 39.10 Investigations and audits.

- **39.10(1)** Each member of the bar of Iowa, in filing the statement required by rule 39.8(1), shall authorize the director to investigate, audit, and verify all funds, securities, and other property held in trust by the member, and all related accounts, safe deposit boxes, and any other forms of maintaining trust property as required by Iowa Rule of Professional Conduct 32:1.15 and chapter 45 of the Iowa Court Rules, together with deposit slips, canceled checks, and all other records pertaining to transactions concerning such property.
- **39.10(2)** Each member of the bar of Iowa shall comply promptly with any request by the director to execute and deliver to the director a written authorization, directed to any bank or depository, for the director to audit and inspect such accounts, safe deposit boxes, securities, and other forms of maintaining trust property by the member in such bank or other depository.
 - **39.10(3)** Each member of the bar of Iowa shall do all of the following:
- a. Cooperate fully with the director in any investigation, audit, or verification of any funds, securities, or property held in trust by that lawyer.
- b. Answer all questions posed by the director which relate to any investigation, audit, or verification, unless claiming the privilege against self-incrimination.
- c. Retain complete records of all trust fund transactions for a period of not less than six years following completion of the matter to which they relate, in accordance with Iowa Rule of Professional Conduct 32:1.15 and Iowa Ct. R. 45.2(2).
- **39.10(4)** The commission with the approval of the supreme court may retain, compensate from the fund, and furnish as staff for the director, such public or certified accountants, investigators, or attorneys as may be deemed necessary to carry out the duties and functions imposed upon the director. When acting under the director's supervision and direction, such staff personnel shall have all the powers granted to the director by this chapter.
- **39.10(5)** When the investigation, audit, or verification provisions of this chapter disclose, in the opinion of the director, a violation of the Iowa Rules of Professional Conduct, or when the member of the bar of Iowa affected by the investigation, audit, or verification has refused to comply with the provisions of this chapter, the director shall promptly report such circumstances to the commission. A copy of such report shall be furnished to the member affected.
- **39.10(6)** However, client trust funds and property held by an Iowa licensed attorney whose law office is situated in another state shall not be subject to investigation, audit, or verification except to the extent such funds and property are related to matters affecting Iowa clients. State or federal funds or property subject to state or federal auditing procedures and in control of an Iowa licensed attorney employed full- or part-time by a state or the United States shall not be subject to investigation, audit, or verification under the provisions of this chapter.

[Court Order November 9, 2001, effective February 15, 2002; April 20, 2005, effective July 1, 2005; December 5, 2007]

Rule 39.11 Annual questionnaire.

39.11(1) The director under the supervision of the supreme court and the commission shall prepare a questionnaire to be annually submitted to and completed by each member of the bar of Iowa except those who have been issued a certificate of exemption pursuant to rule 39.7. Said questionnaire may be (but is not required to be) incorporated as a part of the annual statement provided in rule 39.8(1). This questionnaire shall elicit information to determine whether the member is complying with the

Iowa Court Rules, including but not restricted to, Iowa Rule of Professional Conduct 32:1.15 and chapter 45 of the rules. The commission may prescribe an electronic format for the questionnaire and annual statement and require submission of the questionnaire and annual statement in that form.

39.11(2) A failure to complete and return a questionnaire shall be addressed as provided in rule 39.12.

[Court Order November 9, 2001, effective February 15, 2002; April 20, 2005, effective July 1, 2005; December 5, 2007; June 5, 2008, effective July 1, 2008]

Rule 39.12 Investigations, audits, and annual questionnaire — enforcement.

39.12(1) Failure of bar members to cooperate.

- a. The continued right of a member of the Iowa bar to practice law in this state is conditioned upon the member executing and delivering the authorization provided in rule 39.10(2), furnishing the cooperation required in rule 39.10(3), and completing and returning the annual questionnaire described in rule 39.11. Upon failure of a member of the Iowa bar to comply with any of the rules specified in this paragraph, the member's right to practice law before Iowa courts may be suspended, following the procedure specified in rule 39.8(2).
- b. A member of the bar of Iowa who willfully fails to comply with those rules enumerated in rule 39.12(1)(a) may be held in contempt of the supreme court or may be subject to disciplinary action as provided in chapter 35 of the Iowa Court Rules.

39.12(2) Violation of the Iowa Rules of Professional Conduct.

- a. When the audit, investigation, or verification of funds, securities, or other property held in trust by any member of the bar of Iowa, or a return of any member on the annual questionnaire, discloses an apparent violation of the Iowa Rules of Professional Conduct, the director upon request of the commission, or the commission, may institute disciplinary proceedings under chapter 35 of the Iowa Court Rules for the suspension or revocation of the member's license to practice law in this state.
- b. All information obtained by the director and staff by virtue of the audits, investigations and verifications, and annual questionnaire, shall be held in strict confidence by them and by the supreme court and the commission unless otherwise directed by the supreme court or unless proceedings are initiated pursuant to chapter 35 of the Iowa Court Rules or Iowa Code section 602.10123. If proceedings are initiated pursuant to chapter 35 of the Iowa Court Rules, such information relating to the named respondent may be released only to the respondent, the disciplinary board, and the grievance commission. If proceedings are initiated pursuant to Iowa Code section 602.10123, such information relating to the named accused may be released only to the accused and the attorney general or the special assistant attorney general designated pursuant to Iowa Code section 602.10127, to prosecute the charges.

39.12(3) *Commission subpoena authority.*

- a. The commission shall have subpoen power during any investigation conducted on its behalf to compel the appearance of witnesses or the production of documents before the person designated to conduct the investigation on behalf of the commission.
- b. The commission chair, or other commission member in the absence of the chair, shall have authority to issue a subpoena.
- c. The district court for the county in which the investigation is being conducted shall have jurisdiction over any objection or motion relating to a subpoena and authority to punish disobedience of a subpoena in a contempt proceeding.
- d. Counsel for the commission, the director, or any other person authorized to administer oaths shall have authority to administer an oath or affirmation to a witness. [Court Order December 5, 1973; September 19, 1974; October 16, 1974; April 9, 1975; April 30, 1982;

August 14, 1986, and August 18, 1986, effective September 2, 1986; May 10, 1990, effective July 2, 1990; December 15, 1994, effective January 3, 1995; November 9, 2001, effective February 15, 2002; April 9, 2003; April 20, 2005, effective July 1, 2005; December 5, 2007]

Rule 39.13 Attorneys acting as fiduciaries.

39.13(1) After January 1, 1974, unless a lawyer is the spouse of or is the son-in-law or daughter-in-law of or is related by consanguinity or affinity, within the third degree, to the decedent in an estate, the ward in a conservatorship, the settlor or beneficiary of a trust, or unless such attorney is coexecutor, cotrustee, or coconservator with another party or parties and such other party or parties will receive and pay out any of the funds, securities or other property of the estate, trust, or conservatorship, such lawyer shall not be appointed by a court in any fiduciary capacity for an estate,

trust, or conservatorship until the lawyer has posted a bond in an amount to be determined by the court with sureties approved by the court, and no waiver of such bond shall be recognized by any court of this state. In the event the surety on the bond posted by the lawyer is not a corporate surety, the surety thereon shall not be the ward, any beneficiary or distributee or be related to the lawyer, the ward, or any beneficiary or distributee within the third degree of consanguinity or affinity.

39.13(2) A lawyer who willfully fails to comply with the provisions of this rule may be held in contempt of the supreme court, or may be subject to disciplinary action as provided in chapter 35 of the Iowa Court Rules.

[Court Order November 9, 2001, effective February 15, 2002]

See Iowa Code §§633.173, 633.175.

Rule 39.14 Reinstatement from exemption or suspension.

- **39.14(1)** An attorney who has been suspended for failure to pay the annual fee or assessment or for failure to file the statement, supplement, or questionnaire required by these rules may be reinstated upon a showing that such failure was not willful and by filing the statement required by rule 39.8(1) and the questionnaire required by rule 39.11. An attorney seeking reinstatement after suspension for failure to comply with the provisions of this rule shall pay all delinquent fees, assessments and late filing penalties due under rules 39.5, 39.6 and 39.8, and a reinstatement fee of \$100.
- **39.14(2)** An attorney who applies for reinstatement from suspension under the provisions of chapter 35 shall first file the statement required by rule 39.8(1) and the questionnaire required by rule 39.11, pay all fees, assessments and late filing penalties due and unpaid under rules 39.5, 39.6 and 39.8 at the time of the suspension, pay the current fee and assessment required by rules 39.5 and 39.8, and a reinstatement fee of \$100.
- **39.14(3)** An attorney who has been granted a certificate of exemption under the provisions of rule 39.7 may be reinstated after filing the statement required by rule 39.8(1) and the questionnaire required by rule 39.11, paying all late filing penalties due at the time the exemption was granted, and paying the current fee and assessment required by rules 39.5 and 39.6. [Court Order April 25, 2008; August 10, 2009]

Rule 39.15 Denial of reinstatement for failure to comply with certain obligations.

- **39.15(1)** Denial of reinstatement for failure to comply with an obligation owed to or collected by the Centralized Collection Unit of the Department of Revenue. The supreme court may deny an attorney's application for reinstatement under rule 39.14 for failure to comply with an obligation owed to or collected by the Centralized Collection Unit of the Department of Revenue. The procedure shall be governed by rule 35.22.
- **39.15(2)** Denial of reinstatement for failure to comply with an obligation owed to or collected by the College Student Aid Commission. The supreme court may deny an attorney's application for reinstatement under rule 39.14 for failure to comply with an obligation owed to or collected by the College Student Aid Commission. The procedure shall be governed by rule 35.21.
- **39.15(3)** Denial of reinstatement for failure to comply with a support order. The supreme court may deny an attorney's application for reinstatement under rule 39.14 for failure to comply with a support order. The procedure shall be governed by rule 35.20. [Court Order June 5, 2008, effective July 1, 2008; February 20, 2012]
- Rule 39.16 Attorneys Practicing in Iowa Under the Multijurisdictional Practice Rule. An attorney who establishes an office or other systematic and continuous presence in Iowa for the practice of law under the provisions of rule of professional conduct 32:5.5(d)(2) shall file the annual statement required by rule 39.8(1) and annual questionnaire required by rule 39.11, pay the annual fee and assessment due under rules 39.5 and 39.6, comply with all provisions of chapter 45, cooperate with investigations and audits under rule 39.10, and be subject to the provisions of rule 39.12. [Court Order December 10, 2012]

CHAPTER 41 CONTINUING LEGAL EDUCATION FOR LAWYERS

| Rule 41.1 | Purpose |
|------------|--|
| Rule 41.2 | Continuing legal education commission |
| Rule 41.3 | Continuing legal education requirement |
| Rule 41.4 | Annual fee and report by attorneys to commission |
| Rule 41.5 | Penalty for failure to satisfy continuing legal education requirements |
| Rule 41.6 | Confidentiality |
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| Rule 41.8 | Application of this chapter |
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| Rule 41.10 | Reinstatement from suspension |
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| Rule 41.12 | Basic skills course requirement |

CHAPTER 41 CONTINUING LEGAL EDUCATION FOR LAWYERS

Rule 41.1 Purpose. Only by continuing their legal education throughout their period of the practice of law can attorneys fulfill their obligation competently to serve their clients. Failure to do so shall be grounds for disciplinary action by the supreme court. This chapter establishes minimum requirements for such continuing legal education and the means by which the requirements shall be enforced. [Court Order April 9, 1975; November 9, 2001, effective February 15, 2002]

Rule 41.2 Continuing legal education commission.

41.2(1) There is hereby established a commission on continuing legal education consisting of 12 members. The supreme court shall appoint to the commission ten resident members of this state who are currently licensed to practice law in the state of Iowa, and two residents of this state who are not lawyers. The court shall designate from among the members of the commission a chair who shall serve as such at the pleasure of the court. Of the members first appointed to the commission four shall serve a term of three years, four shall serve a term of four years, and four shall serve a term of five years. Members thereafter appointed, except for those appointed to fill unexpired terms, shall be appointed for a term of three years. No member shall serve more than two consecutive complete terms as a member of the commission. The supreme court shall adopt rules and regulations governing the operations and activities of the commission.

41.2(2) The commission shall have the following duties:

- a. To exercise general supervisory authority over the administration of this chapter.
- b. To accredit courses, programs, and other educational activities which will satisfy the educational requirements of this chapter; all being subject to continuous review by the commission.
 - c. To foster and encourage the offering of such courses, programs and educational activities.
- d. To submit to the supreme court proposed rules and regulations¹ not inconsistent with this chapter to govern the operations and activities of the commission.
- e. Subject to the approval of the supreme court, to employ such persons as it deems necessary for the proper administration of this chapter.
- f. To make recommendations to the supreme court concerning this chapter and the enforcement thereof; to present an annual budget and a recommended annual fee for costs of administering this chapter.
- g. To report promptly to the supreme court concerning any violation of this chapter by any member of the bar of this state.
- h. On March 1 of each year, and at such additional times as the supreme court may order, the commission shall file with the supreme court a written report reviewing in detail the activities of the commission during the preceding calendar year together with an audit of commission funds certified by a certified public accountant licensed to practice in Iowa.
- **41.2(3)** Members of the commission shall not be compensated but shall be reimbursed for expenses incurred by them in the performance of their duties upon vouchers approved by the supreme court.

[Court Order April 9, 1975; July 5, 1978; November 13, 1984; November 14, 1985; November 11, 1986; November 19, 1987; November 21, 1988; November 16, 1989; November 9, 2001, effective February 15, 2002; February 22, 2002; December 5, 2007]

Rule 41.3 Continuing legal education requirement.

- **41.3(1)** Each attorney admitted to practice in this state shall complete a minimum of 15 hours of legal education accredited by the commission, during each calendar year. The commission is authorized, pursuant to guidelines established by the supreme court, to determine the number of hours for which credit will be given for particular courses, programs or other legal education activities. Under rules to be promulgated by the supreme court, an attorney may be given credit in one or more succeeding calendar years, not exceeding two such years, for completing more than 15 hours of accredited education during any one calendar year.
- **41.3(2)** The 15 hours required by rule 41.3(1) shall include a minimum of 3 hours, every two calendar years, devoted exclusively to the area of legal ethics. Excess hours of education devoted to

See Chapter 42 of the Iowa Court Rules

legal ethics can be carried over for purposes of the annual 15-hour requirement under rule 41.3(1) but cannot be carried over beyond the two-year period for the special legal ethics requirement under this rule

41.3(3) Up to 6 hours of the 15 hours required by rule 41.3(1) each calendar year may be obtained through completion of unmoderated legal education accredited by the commission. [Court Order April 9, 1975; December 6, 1978; January 8, 1988; November 9, 2001, effective February 15, 2002; February 22, 2002; February 21, 2012; March 21, 2014]

Rule 41.4 Annual fee and report by attorneys to commission.

- **41.4(1)** On or before March 10 of each year, each attorney admitted to practice in this state shall pay to the commission a prescribed fee for costs of administering this chapter.
- **41.4(2)** On or before March 10 of each year, each attorney admitted to practice in this state shall make a written report to the commission, in such form as the commission shall prescribe, concerning completion of accredited legal education during the preceding calendar year; provided, however, that an attorney shall not be required to comply with this rule or comply with the continuing legal education requirements set forth in rule 41.3 for the year during which the attorney was admitted to practice. Each annual report shall be accompanied by proof satisfactory to the commission that the attorney has met the requirements for continuing legal education for the calendar year for which such report is made.
- **41.4(3)** Each attorney admitted to practice in this state shall make a written report to the commission, in such form as the commission shall prescribe, concerning completion of accredited legal ethics education. The report is to be filed on or before March 10 following completion of each two-year period under the requirement. An attorney shall not be required to comply with this requirement for the year of admission to practice.
- **41.4(4)** All attorneys who fail by March 10 of each year to file the annual report or to pay the prescribed fee shall, in addition, pay a penalty as set forth in the following schedule if either the annual report is filed or the prescribed fee is paid after March 10. The penalty fees collected shall be used to pay the costs of administering this chapter, or for such other purposes within the office of professional regulation as the supreme court may direct.

Penalty Schedule:

| If Filed: | Penalty: |
|------------------------------------|----------|
| After March 10 but before April 12 | \$100 |
| After April 11 but before May 12 | \$150 |
| After May 11 | \$200 |

41.4(5) The commission may prescribe an electronic format for the annual report and require submission of the report in that form.

[Court Order April 9, 1975; August 28, 1975; August 12, 1980; January 8, 1988; January 24, 2000; November 9, 2001, effective February 15, 2002; April 25, 2008; June 5, 2008, effective July 1, 2008; January 19, 2010; April 25, 2014]

Rule 41.5 Penalty for failure to satisfy continuing legal education requirements.

41.5(1) Attorneys who fail to comply with the provisions of rule 41.4 or who file a report showing on its face that they have failed to complete the required number of hours of continuing legal education may have their right to practice law suspended by the supreme court, provided that at least 15 days prior to such suspension, notice of such delinquency has been served upon them in the manner provided for the service of original notices in Iowa R. Civ. P. 1.305 or has been forwarded to them by restricted certified mail, return receipt requested, addressed to them at their last-known address. Such attorneys shall be given the opportunity during said 15 days to file in the office of professional regulation an affidavit disclosing facts demonstrating their noncompliance was not willful and tendering such documents and sums and penalties which, if accepted, would cure the delinquency, or to file in duplicate in the office of clerk of the supreme court a request for hearing to show cause why their license to practice law should not be suspended. A hearing shall be granted if requested. If, after hearing, or failure to cure the delinquency by satisfactory affidavit and compliance, an attorney is suspended, the attorney shall be notified thereof by either of the two methods above provided for notice of delinquency.

- **41.5(2)** Any attorney suspended pursuant to this chapter shall do all of the following:
- a. Within 15 days in the absence of co-counsel, notify clients in all pending matters to seek legal advice elsewhere, calling attention to any urgency in seeking the substitution of another lawyer.
- b. Within 15 days deliver to all clients being represented in pending matters any papers or other property to which they are entitled or notify them and any co-counsel of a suitable time and place where the papers and other property may be obtained, calling attention to any urgency for obtaining the papers or other property.
 - c. Within 30 days refund any part of any fees paid in advance that have not been earned.
- d. Within 15 days notify opposing counsel in pending litigation or, in the absence of such counsel, the adverse parties, of the suspension and consequent disqualification to act as a lawyer after the effective date of such discipline.
- e. Within 15 days file with the court, agency, or tribunal before which the litigation is pending a copy of the notice to opposing counsel or adverse parties.
 - f. Keep and maintain records of the steps taken to accomplish the foregoing.
- g. Within 30 days file proof with the supreme court and with the Iowa Supreme Court Attorney Disciplinary Board of complete performance of the foregoing, and this shall be a condition for application for readmission to practice.
- **41.5(3)** Any attorney suspended pursuant to this chapter shall refrain, during such suspension, from all facets of the ordinary law practice including, but not limited to, the examination of abstracts; consummation of real estate transactions; preparation of legal briefs, deeds, buy and sell agreements, contracts, wills and tax returns; and acting as a fiduciary. Such suspended attorney may, however, act as a fiduciary for the estate, including a conservatorship or guardianship, of any person related to the suspended attorney within the second degree of affinity or consanguinity.
- **41.5(4)** In addition, any attorney who willfully fails to comply with this chapter may be subject to disciplinary action as provided in chapter 35 of the Iowa Court Rules, upon report filed by the commission with the disciplinary board.
- **41.5(5)** For good cause shown, the commission may, in individual cases involving hardship or extenuating circumstances, grant waivers of the minimum educational requirements or extensions of time within which to fulfill the same or make the required reports.

[Court Order April 9, 1975; November 21, 1977; December 6, 1978; January 15, 1979; August 12, 1980; April 25, 1985; December 15, 1994, effective January 3, 1995; November 9, 2001, effective February 15, 2002; April 20, 2005, effective July 1, 2005; April 25, 2008; June 5, 2008, effective July 1, 2008]

- **Rule 41.6 Confidentiality.** Unless otherwise directed by the supreme court, the files, records and proceedings of the commission, as they relate to or arise out of any failure of any attorney to satisfy the requirements of this chapter, shall be deemed confidential and shall not be disclosed, except in furtherance of its duties or upon the request of the attorney affected, or as they may be introduced in evidence or otherwise produced in proceedings taken in accordance with this chapter. [Court Order April 9, 1975; November 9, 2001, effective February 15, 2002]
- Rule 41.7 Inactive practitioners. A member of the bar who is not engaged in the practice of law in the state of Iowa as defined in Iowa Ct. R. 39.7, upon application to the commission, may be granted a waiver of compliance with this chapter and obtain a certificate of exemption. No person holding such certificate of exemption shall practice law in this state until reinstated. The supreme court will make rules and regulations governing the continuing legal education requirements for reinstatement of attorneys who, for any reason, have not theretofore been entitled to practice law in this state for any period of time subsequent to their admission to the bar.

Rule 41.8 Application of this chapter. This chapter shall apply to every person licensed to practice law in the state of Iowa.

[Court Order April 9, 1975; November 9, 2001, effective February 15, 2002]

[Court Order April 9, 1975; November 9, 2001, effective February 15, 2002]

Rule 41.9 Reserved.

Rule 41.10 Reinstatement from suspension.

41.10(1) An attorney who has been suspended for failure to pay the annual fee, complete required continuing legal education, or file the annual report required by rule 41.4 may be reinstated upon a showing that such failure was not willful and by filing such report showing completion of all continuing legal education required by Iowa Ct. Rs. 41.3 and 42.2 through the end of the last complete reporting year. An attorney seeking reinstatement after suspension for failure to comply with the provisions of this rule shall pay all delinquent fees and late filing penalties due under rule 41.4 and a reinstatement fee of \$100.00.

41.10(2) An attorney who applies for reinstatement from suspension under the provisions of chapter 35 of the Iowa Court Rules shall first file the annual report required by rule 41.4 showing completion of all continuing legal education required by Iowa Ct. Rs. 41.3 and 42.2 through the end of the last complete reporting year, pay all fees and late filing penalties due under rule 41.4 and unpaid at the time of the suspension, and pay a reinstatement fee of \$100.00. The commission may grant an attorney additional time after the effective reinstatement date, on such terms and conditions as it may prescribe, to complete and furnish evidence of compliance with these continuing legal education requirements.

[Court Order April 25, 2008]

Rule 41.11 Denial of reinstatement for failure to comply with certain obligations.

41.11(1) Denial of reinstatement for failure to comply with an obligation owed to or collected by the Centralized Collection Unit of the Department of Revenue. The supreme court may deny a lawyer's application for reinstatement under rule 41.7 or 41.10 for failure to comply with an obligation owed to or collected by the Centralized Collection Unit of the Department of Revenue. The procedure shall be governed by rule 35.22.

41.11(2) Denial of reinstatement for failure to comply with an obligation owed to or collected by the College Student Aid Commission. The supreme court may deny a lawyer's application for reinstatement under rule 41.7 or 41.10 for failure to comply with an obligation owed to or collected by the College Student Aid Commission. The procedure shall be governed by rule 35.21.

41.11(3) Denial of reinstatement for failure to comply with a support order. The supreme court may deny a lawyer's application for reinstatement under rule 41.7 or 41.10 for failure to comply with a support order. The procedure shall be governed by rule 35.20. [Court Order June 5, 2008, effective July 1, 2008; February 20, 2012]

Rule 41.12 Basic skills course requirement.

41.12(1) Every Iowa lawyer admitted to practice by examination after December 31, 2008, must complete a Basic Skills Course. The course must be completed within one year of the newly admitted lawyer's date of admission to practice in Iowa.² The course may be completed after the last day of the bar examination that resulted in admission. If the course is completed after the last day of the bar examination, but the applicant fails the examination, the applicant will remain in compliance with this rule so long as the applicant passes the next examination offered.

41.12(2) The Basic Skills Course must total at least eight actual hours of instruction and include at least one actual hour qualifying for credit in the area of legal ethics. The course shall include instruction on Iowa law selected from at least eight of the following topic areas:

Civil Procedure

Criminal Law

Criminal Procedure

Family Law

Guardianships, Conservatorships, Trusts, and Powers of Appointment

Business Entities

Probate

Torts

Contracts

As an interim implementation provision, lawyers admitted during calendar year 2009 must complete the Basic Skills Course within two years of the newly admitted lawyer's
date of admission to practice in Iowa.

Real Estate Transactions Ethics and Professionalism

- **41.12(3)** Newly admitted lawyers shall be entitled to claim credit for attendance at an accredited Basic Skills Course against the continuing legal education requirements of rules 41.3 and 42.2, but are not exempt from reporting and fee payment duties of rule 41.4.
- **41.12(4)** A lawyer who fails to complete the Basic Skills Course within one year of the date of admission may have the right to practice law suspended under the provisions of rule 41.5.
- **41.12(5)** The commission may, in individual cases involving hardship or extenuating circumstances, grant waivers of the Basic Skills Course requirement or extensions of time in which to complete the Basic Skills Course.
- **41.12(6)** The Basic Skills Course may be offered by any provider of continuing legal education, but must be reviewed and accredited by the Commission on Continuing Legal Education as provided in rule 42.4. The Basic Skills Course may be conducted in installments over time, and may be offered by computer-based transmission as provided in rule 42.3. Any provider of the Basic Skills Course is required to report attendance in the manner specified by the commission. [Court Order October 9, 2009; November 24, 2010]

CHAPTER 42 REGULATIONS OF THE COMMISSION ON CONTINUING LEGAL EDUCATION

| Rule 42.1 | Definitions |
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| Rule 42.2 | Continuing legal education requirement |
| Rule 42.3 | Standards for accreditation |
| Rule 42.4 | Accreditation of programs and activities |
| Rule 42.5 | Hardships or extenuating circumstances |
| Rule 42.6 | Exemptions for inactive practitioners |
| Rule 42.7 | Reinstatement of inactive practitioners |
| Rule 42.8 | Staff |
| Rule 42.9 | Divisions |
| Rule 42.10 | Hearings |
| Rule 42.11 | Notice of failure to comply |
| | |

CHAPTER 42 REGULATIONS OF THE COMMISSION ON CONTINUING LEGAL EDUCATION

Rule 42.1 Definitions. For the purpose of these regulations, the following definitions shall apply:

- (1) An "accredited program or activity" means a continuing legal education activity meeting the standards set forth in rule 42.3, which has received accreditation by the commission pursuant to rule 42.4.
 - (2) An "attorney" means any person licensed to practice law in the state of Iowa.
- (3) The "commission" means the Commission on Continuing Legal Education or any division thereof.
- (4) "Guidelines" means a commission document that prescribes requirements for accreditation of continuing legal education programs and is made available to sponsors and lawyers on the commission web page.
- (5) An "hour" of continuing legal education means a clock-hour spent by an attorney in actual attendance at or completion of an accredited legal education activity.
 - (6) "Legal ethics" means a separate, designated, and dedicated session of instruction:
- a. Referring to and based on the disciplinary rules or ethical considerations of the ethics or professional responsibility code for attorneys in the jurisdiction where the instruction is presented; or
- b. Designed to help attorneys detect, prevent, or respond to substance-related disorders or mental illness that impairs professional competence. The instruction must focus on issues in the legal profession and in the practice of law, and not issues of substance-related disorders or mental health in general.
- (7) "Unmoderated activity" means a CLE activity presented by delayed or on-demand transmission or broadcast, or pre-recorded media, that has an interactive component and is approved by the commission based on its guidelines. "Pre-recorded media," for purposes of this rule, includes but is not limited to audiotape, videotape, CD, podcast, CD-ROM, DVD, and self-paced computer-based instruction.
 - (8) A "quorum" of the entire commission means six or more members of the commission.
 - (9) "Moderated activity" means:
- a. "Standard (live)"—A live CLE activity presented in a suitable classroom setting devoted to the program.
- b. "Satellite"—A live CLE activity broadcast by satellite link to a classroom setting or a central viewing or listening location. The attorney must be able to contact the moderator or presenters during the activity to comment and ask questions.
- c. "Video conference"—A live CLE activity broadcast by cable, wire, or fiber optic link to a classroom setting or a central viewing or listing location. The attorney must be able to contact the moderator or presenters during the activity to comment and ask questions.
- d. "Live webcast"—A live CLE activity broadcast over the Internet in audio or audio plus video form to viewers at remote locations or at a central viewing or listening location. The attorney must be able to contact the moderator or presenters during the activity to comment and ask questions.
- e. "Live teleconference"—A live CLE activity broadcast over the telephone in audio or audio plus video form to listeners at remote locations or at a central viewing or listening location. The attorney must be able to contact the moderator or presenters during the activity to comment and ask questions.
- f. "Video replay"—A recorded CLE activity presented in audio plus video form in a suitable classroom setting or central viewing location to a broad attorney population. The attorney must be able to contact a live moderator during the activity to comment or ask questions.
- g. "Audio replay"—A recorded CLE activity presented in audio form in a suitable classroom setting, central listening location, or by telephone to a broad attorney population. The attorney must be able to contact a live moderator during the activity to comment or ask questions. [Court Order November 25, 1975; November 9, 2001, effective February 15, 2002; February 20, 2012; August 24, 2012; March 21, 2014]

Rule 42.2 Continuing legal education requirement.

42.2(1) A minimum of 15 hours of continuing legal education must be completed by each attorney for each calendar year in the manner stated in Iowa Ct. R. 41.3(1). Each attorney shall, every two

years, complete a minimum of three hours of legal education devoted specifically to the area of legal ethics.

- **42.2(2)** Hours of continuing legal education credit may be obtained by attending or participating in a continuing legal education activity, either previously accredited by the commission or which otherwise meets the requirements herein and is retroactively accredited by the commission pursuant to rule 42.4(3).
- **42.2(3)** An attorney desiring to obtain credit for one or more succeeding calendar years, not exceeding two such years, for completing more than 15 hours of accredited legal education during any one calendar year, under Iowa Ct. R. 41.3(1), shall report such "carry-over" credit at the time of filing the annual report to the commission on or before March 10 of the year following the calendar year during which the claimed additional legal education hours were completed.

[Court Order November 25, 1975; December 6, 1978; January 8, 1988; November 9, 2001, effective February 15, 2002; March 21, 2014; April 25, 2014]

Rule 42.3 Standards for accreditation.

- **42.3(1)** A continuing legal education activity qualifies for accreditation if the commission determines that the activity complies with all of the following:
- a. It constitutes an organized program of learning (including a workshop or symposium) that contributes directly to the professional competency of an attorney.
- b. It pertains to common legal subjects or other subject matters that integrally relate to the practice of law.
- c. It is conducted by attorneys or individuals who have a special education, training, and experience by reason of which said individuals should be considered experts concerning the subject matter of the program, and preferably is accompanied by a paper, manual, or written outline that substantively pertains to the subject matter of the program.
- d. It is presented in the form of moderated programming, or in the form of unmoderated programming approved by the commission in its guidelines.
- **42.3(2)** No activity will be accredited that involves solely self-study, including television viewing, video or sound recorded programs, or correspondence work, except as may be allowed pursuant to rule 42.5.

[Court Order November 25, 1975; November 9, 2001, effective February 15, 2002; February 22, 2002; March 21, 2014]

Rule 42.4 Accreditation of programs and activities.

- **42.4(1)** Accreditation of activities. A program sponsor that desires accreditation of a program, course, program or other legal education activity or an attorney who desires to establish accreditation of a program, course, or other legal education activity shall apply for accreditation to the commission in advance of the commencement of the activity or after completion of the activity in the manner the commission prescribes. The commission shall approve or deny such application in writing or by electronic mail within 30 days of receipt of such application. The application shall state the dates, subjects offered, total hours of instruction, names and qualifications of speakers, and other pertinent information.
- **42.4(2)** Fee for organization applications for accreditation. To support administration of this chapter, any organization or other activity sponsor applying for accreditation of an activity shall pay to the commission a prescribed nonrefundable application fee for each activity. No application fee shall be required of an attorney who applies for accreditation solely as an attendee. The commission may waive the application fee for any of the following reasons:
 - a. For any activity offered at no charge to attendees for the educational portion of the activity.
- b. For any presentation of the identical program at additional places or dates during a calendar year, provided the original presentation of the program was approved.

[Court Order November 25, 1975; November 9, 2001, effective February 15, 2002; February 22, 2002; November 23, 2004, effective July 1, 2005; March 21, 2014]

Rule 42.5 Hardships or extenuating circumstances.

42.5(1) The commission may, in individual cases involving hardship or extenuating circumstances, grant waivers of the minimum educational requirements or extensions of time within which to fulfill the same or make the required reports. No waiver or extension of time shall be granted unless written application therefor shall be made on forms prescribed by the commission. A

\$25 fee will be assessed on all waiver or extension of time applications received after January 15 of the year following the year in which the alleged hardship occurred.

- **42.5(2)** Waivers of the minimum educational requirements may be granted by the commission for any period of time not to exceed one year. In the event that the hardship or extenuating circumstances upon which a waiver has been granted continue beyond the period of the waiver, the attorney must reapply for an extension of the waiver. The commission may, as a condition of any waiver granted, require the applicant to make up a certain portion or all of the minimum educational requirements waived by such methods as may be prescribed by the commission.
- **42.5(3)** Extensions of time within which to fulfill the minimum educational requirements may, in individual cases involving hardship or extenuating circumstances, be granted by the commission for a period not to exceed six months immediately following expiration of the year in which the requirements were not met. Hours of minimum educational requirement completed within such an extension period shall be applied first to the minimum educational requirement for the preceding year and shall be applied to the current or following year only to the extent that such hours are not required to fulfill the minimum educational requirement for the preceding year.

[Court Order November 25, 1975; August 12, 1980; November 9, 2001, effective February 15, 2002]

Rule 42.6 Exemptions for inactive practitioners. A member of the bar who is not engaged in the practice of law in the state of Iowa as defined in Iowa Ct. R. 39.7 residing within or without the state of Iowa may be granted a waiver of compliance and obtain a certificate of exemption upon written application to the commission. The application shall contain a statement that the applicant will not engage in the practice of law in Iowa, as defined in Iowa Ct. R. 39.7, without first complying with all regulations governing reinstatement after exemption. The application for a certificate of exemption shall be submitted upon the form prescribed by the commission.

[Court Order November 25, 1975; November 9, 2001, effective February 15, 2002]

Rule 42.7 Reinstatement of inactive practitioners.

- **42.7(1)** Inactive practitioners who have been granted a waiver of compliance with these regulations and obtained a certificate of exemption shall, prior to engaging in the practice of law in the state of Iowa as defined in Iowa Ct. R. 39.7, satisfy the following requirements for reinstatement:
- a. Submit written application for reinstatement to the commission upon forms prescribed by the commission together with a reinstatement fee of \$25 and all late filing penalties due at the time the exemption was granted.
 - b. Furnish in the application evidence of one of the following:
- (1) Having engaged in the full-time practice of law, as defined in Iowa Ct. R. 39.7, in another state of the United States or the District of Columbia and completion of continuing legal education for each year of inactive status substantially equivalent in the opinion of the commission to that required under chapter 41 of the Iowa Court Rules.
- (2) Successful completion of an Iowa state bar examination conducted within one year immediately prior to the submission of such application for reinstatement.
- (3) Completion of a total number of hours of accredited continuing legal education computed by multiplying 15 by the number of years a certificate of exemption shall have been in effect for such applicant, but limited to a maximum requirement of 100 hours. The continuing legal education required for reinstatement shall include hours devoted specifically to the area of legal ethics, computed as follows: three hours for every two calendar years in which a certificate of exemption shall have been in effect, but limited to a maximum requirement of 10 hours. Alternatively, the legal ethics requirement may be satisfied by obtaining a scaled score of 80 or higher on the Multistate Professional Responsibility Examination within one year immediately prior to the submission of the application for reinstatement.
- **42.7(2)** Notwithstanding that an applicant for reinstatement has not fully complied with the requirements for reinstatement set forth in rule 42.7(1)(b), the commission may conditionally reinstate such applicant on such terms and conditions as it may prescribe regarding the period of time in which the applicant shall furnish evidence of compliance with the requirements of rule 42.7(1)(b). [Court Order November 25, 1975; July 28, 1977; January 8, 1988; December 15, 1994, effective January 3, 1995; April 10, 1997; November 9, 2001, effective February 15, 2002; August 10, 2009; December 10, 2012]
- Rule 42.8 Staff. The assistant director for boards and commissions of the office of professional regulation shall serve as the principal executive officer of the commission. The commission may,

subject to the approval of the court, employ such other employees as the commission deems necessary to carry out its duties under chapter 41 of the Iowa Court Rules, who shall perform such duties as the commission may from time to time direct.

[Court Order November 25, 1975; November 9, 2001, effective February 15, 2002; December 5, 2007]

Rule 42.9 Divisions. The commission may organize itself into divisions of not fewer than three members for the purpose of considering and deciding matters assigned to them. [Court Order November 25, 1975; November 9, 2001, effective February 15, 2002]

Rule 42.10 Hearings. In the event of denial, in whole or in part, of any application, the applicant shall have the right, within 20 days after the sending of the notification of the denial by ordinary mail, to request in writing a hearing before the commission which shall be held within 90 days after receipt of the request for hearing. The decision of the commission after such hearing shall be final. Any hearing on a revocation of the accreditation of an accredited sponsor, the denial of a hardship application, or a recommendation for disciplinary action under Iowa Ct. R. 41.5(4) shall be before a quorum of the entire commission.

[Court Order November 25, 1975; November 9, 2001, effective February 15, 2002]

Rule 42.11 Notice of failure to comply. In the event an attorney fails to comply with the provisions of Iowa Ct. R. 41.4 or files a report showing on its face failure to complete the required number of accredited hours of continuing legal education, the commission shall notify said attorney in writing of such apparent noncompliance and said attorney shall have 15 days from the mailing of said notice to cure said failure to comply or make an appropriate application under rule 42.5. If the failure to comply is not cured or such application not approved, the commission shall report promptly to the supreme court the failure of the attorney to comply with chapter 41 of the Iowa Court Rules. [Court Order November 25, 1975; November 9, 2001, effective February 15, 2002]